Child Care and Development Fund (CCDF) Plan
For

Indiana
FFY 2012-2013

PART 1
ADMINISTRATION

1.1 Contact Information

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto.(658D, 658E)

1.1.1 Who is the Lead Agency designated to administer the CCDF program? Identify the Lead Agency and Lead Agency"s Chief Executive Officer designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals and disallowance notifications to the designated contact identified here. (658D(a), §98.10)

Name of Lead Agency: Indiana Family and Social Services Administration, Division of Family Resources

Address of Lead Agency: 402 W. Washington Street, Room W392, Indianapolis, IN 46204

Name and Title of the Lead Agency's Chief Executive Officer: Michael Gargano, Secretary

Phone Number: (317) 233-8798

Fax Number: 317-232-4490

E-Mail Address: Michael.Gargano@fssa.IN.gov

Web Address for Lead Agency (if any): http://www.in.gov/fssa

1.1.2 Who is the CCDF administrator? Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. **If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information.** (§§98.16(a) and (c)(1))

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Melanie Brizzi

Title of CCDF Administrator: Child Care Administrator

Address of CCDF Administrator: 402 W. Washington Street, Room W386, Indianapolis, IN 46204

Phone Number: 317-234-3313

Fax Number: 317-232-4490

E-Mail Address: Melanie.Brizzi@fssa.in.gov

Web Address for Lead Agency (if any): http://in.gov/fssa/carefinder/

Phone Number for CCDF program information

(for the public) (if any): 1-877-511-1144

Web Address for CCDF program

(for the public) (if any): http://in.gov/fssa/carefinder/

Web Address for CCDF program policy manual

(if any): http://in.gov/fssa/carefinder/

Web Address for CCDF program administrative rules

(if any): NA

b) Contact Information for CCDF Co-Administrator (if applicable):

Name of CCDF Co-Administrator:

Title of CCDF Co-Administrator:

Address of CCDF Co-Administrator:

Phone Number:

Fax Number:

E-Mail Address:
Description of the role of the Co-Administrator:

1.2 Estimated Funding

1.2.1 What is your expected level of funding for the first year of the FY 2012 - FY 2013 plan period?

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period from October 1, 2011 through September 30, 2012. (§98.13(a)).

FY 2012 Federal CCDF allocation (Discretionary, Mandatory and Matching): $ 111,904,759
Federal TANF Transfer to CCDF: $ 27,158,599
Direct Federal TANF Spending on Child Care: $ 0
State CCDF Maintenance-of-Effort Funds: $ 15,356,947
State Matching Funds: $ 17,916,102

 Reminder - Lead Agencies are reminded that not more than 5 percent of the aggregate CCDF funds, including federal funds and required State Matching funds, shall be expended on administration costs (§98.52) once all FY2012 funds have been liquidated. State Maintenance-of-Effort funds are not subject to this limitation.

1.2.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF Matching and maintenance-of-effort (MOE) requirements described in 98.53(e) and 98.53(h)? Check all that apply.
Territories not required to meet CCDF Matching and MOE requirements should mark
☐ N/A here

Note: The Lead Agency must check at least public and/or private funds as matching, even if pre-kindergarten (pre-k) funds also will be used.

☑ Public funds to meet the CCDF Matching Fund requirement. Public funds may include any general revenue funds, county or other local public funds, State/Territory-specific funds (tobacco tax, lottery), or any other public funds.
If checked, identify source of funds:

State Appropriations

If known, identify the estimated amount of public funds the Lead Agency will receive:
 33,273,049
☐ Private Donated Funds to meet the CCDF Matching Fund requirement. Only private received by the designated entities or by the Lead Agency may be counted for match purposes. (98.53(f))

If checked, are those funds:
☐ donated directly to the State?
☐ donated to a separate entity(ies) designated to receive private donated funds?
If checked, identify the number of entities designated to receive private donated funds and provide name, address, contact and type:

If known, identify the estimated amount of private donated funds the Lead Agency will receive:
☐ State expenditures for Pre-K programs to meet the CCDF Matching Funds requirement.
If checked, provide the estimated percentage of Matching Fund requirement that will be met with pre-k expenditures (not to exceed 30%):
If percentage is more than 10% of the Matching fund requirement, describe how the State will coordinate its pre-k and child care services:

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for Matching Funds requirement:
Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents:

☐ State expenditures for Pre-K programs to meet the CCDF Maintenance of Effort (MOE) requirements.

If checked,
☐ The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.53(h)(1).
Estimated percentage of MOE Fund requirement that will be met with pre-k expenditures (not to exceed 20%):
If percentage is more than 10% of the MOE fund requirement, describe how the State will coordinate its pre-k and child care services to expand the availability of child care:

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for MOE Fund requirement:
 Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents:

1.2.3 Describe the activities for which quality funds (including targeted quality funds for infants and toddlers, school-age children, and resource and referral) will be used in FY 2012. In as much detail possible, list the activities that will be funded, the estimated amount of CCDF quality funds that will be used for each activity, and how these activities relate to the Lead Agency's overall goal of improving the quality of child care for low-income children.

Activity	Estimated Amount of CCDF Quality Funds (indicate if targeted funds will be used)	Purpose	Projected Impact and Anticipated Results

1) Ensuring the health and safety of children	1) $2,905,530	1) Monitoring and enforcement and of child care licensing/registration regulations and consultation on health and safety standards	1) Children in child care will be safe and healthy.
2) Improving child care program quality	2) $9,346,851 (includes targeted funds)	2) Provide TA, mentoring,program supports,program recognition,accreditation fees, and parent and community outreach to increase the quality in child care programs.	2) Parents will have the necessary support to find the best quality program to meet their family's needs. All children will receive better care in safe, nuturing environments with planned stimulating activities that support early learning.
3) Professional development of the child care workforce.	3) $2,868,168 (includes targeted funds)	3) Develop and support a formal system of ECE career pathways with accessible options and a meaningful sequence of qualifications and credentials to promote higher quality of services for children. Provide scholarships,career counseling,mentoring,and accessible formal and nonformal training opportunities for practitioners within the child care workforce.	3) A well qualified ECE workforce with opportunities for professional growth from entry level to Doctoral degrees.

1.2.4 Will the Lead Agency distribute quality funds to counties or local entities?

☑ No, the Lead Agency will manage all quality funds directly

☐ Yes, the Lead Agency will manage some quality funds directly and distribute a portion to local entities. Estimated amount or percentage to be distributed to localities

☐ Yes, all quality funds will be distributed to local entities
☐ Other.

Describe:

1.3 CCDF Program Integrity and Accountability

Program integrity is defined to include efforts that ensure effective internal controls over the administration of CCDF funds. The Lead Agency is responsible for monitoring programs and services, ensuring compliance with the rules of the program, promulgating rules and regulations to govern the overall administration of the plan and oversee the expenditure of funds by sub-grantees and contractors. (§ 98.11(b)) Accountability measures should address administrative error, which includes unintentional agency error, **as well as address** program violations, both unintentional and intentional, that may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

1.3.1. Describe the strategies the Lead Agency will utilize to ensure effective internal controls are in place. The **description** of internal controls may include, but is not limited to a description of processes to ensure sound fiscal management, to identify areas of risk or to establish regular evaluation of control activities.
Describe:

The Lead Agency is responsible for promulgating rules and establishing policies and procedures to govern the CCDF subsidy program including eligibility determination, child care provider eligibility, and payment to providers. Regular monitoring and review of practice and procedures, along with regular reporting insures that the program is being executed within all established rules, regulations and policies.

The Lead Agency utilizes adequate control mechanisms to insure adherence to Generally Accepted Accounting Principles (GAAP) and all federal and state requirements, including monthly and annual financial reviews, annual and random audits of contractors, sub- grantees, and child care programs.

The CCDF program is administered at the State level and the Lead Agency maintains county level budgetary control for projected CCDF enrollment to ensure that adequate funds are available to support continuity of care for enrolled children.

The Lead Agency contracts directly with local Intake Agents to determine family eligibility. Any subcontracts for these services are approved by the Lead Agency prior to implementation. The Lead Agency conducts extensive training and monitoring of each Intake Agent to ensure eligibility services are family friendly and comply with all established eligibility rules, regulations, and policies. Local Intakes are required to utilize the Automated Intake System (AIS) software designed to enforce CCDF subsidy program policies and prevent specific types of errors. User IDs are cross checked regularly among system users, providers, and recipients to monitor for possible misuse. Quality Assurance reports are regularly run in AIS to ensure data accuracy and reliability. Intake Agents scan in all relevant eligibility documentation allowing for remote QA review within 60 days by the Lead Agency for prompt and thorough identification of missing documentation and/or possible improper payments. This prompt identification of errors significantly limits the occurrence and the amount of improper payments.

The Lead Agency contracts with a vendor to provide time and attendance data collection captured

through swipe card technology. This data ensures that correct reimbursement is made to child care providers for the attendance of eligible children.

The Lead Agency completes data matches with ICES (Indiana's Client Eligibility System for TANF/SNAP) and the Paris database to identify potential eligibility issues.

The Lead Agency is responsible for licensing and certifying child care providers to insure that they meet the minimum eligibility standards as required to receive CCDF reimbursement. The Lead Agency utilizes the Indiana Child Care Information System (CCIS) to ensure that all relevant eligibility data for both child care providers and CCDF applicants are entered correctly and timely so that both the eligibility of the provider and of the family can be verified.

CCDF applicants and providers have a multi-level appeal process available to them.

1.3.2. Describe the processes the Lead Agency will use to monitor all sub-recipients. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements. (98.11 (a) (3))

Definition: A sub-recipient (including a sub-contractor and or sub-grantee) is a non-Federal entity that expends Federal awards (contract or grant) received from another entity to carry out a Federal program, but does not include a vendor nor does it include an individual who is a beneficiary of such a program. OMB Circular A-133 Section 210 provides additional information on the characteristics of a **sub-recipient and vendor** (http://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2010). The description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified, and establishing performance indicators or measures related to improper payments.
Describe:

The Lead Agency awards all CCDF contracts based on a competitive procurement process. Each contract contains clearly identified benchmarks or performance measures. Each claim submitted for reimbursement requires three signatures verifying that all expenses claimed are allowable.

Local Intake agent practice and procedures are monitored through:

- *Weekly quality assurance review of data including identification of any critical errors;*
- *Weekly quality assurance reports distributed to local entity as well as policy staff*
- *Monthly quality assurance conference calls;*
- *Bi-weekly conference calls with the following participants: all local entities; budget/operations staff, policy staff, and quality assurance staff*
- *Scanning of family application documents for direct service vouchers;*
- *Review of family application documents within 90 days for eligibility;*
- *Initial eligibility errors receive a monetary penalty;*
- *All ineligible applications are required to pay back all monthly case file payments paid;*
- *Monthly random sample of parent and provider customer satisfaction surveys;*
- *Monthly and quarterly program data reporting;*
- *Monthly fiscal reporting; and*

• If the error rate is over 3% the Intake will be put on probation for 3 months.

Payments made to child care providers are monitored regularly through review of the swipe card data captured by the electronic payment attendance system. Swipe activity is reconciled bi-weekly. Manual reviews of provider claims that differ from the automated claim are conducted. FSSA audit performs provider audits utilizing data mining to identify suspicious swipe patterns and conducts random provider audits to insure compliance with the CCDF policy and procedures.

All other contractors/grantees, including those implementing quality improvement efforts and automation are reviewed monthly to ensure that all expenditures claimed are allowable. Periodic progress reports and outcomes measurements are reviewed to ensure that the goals of the CCDF program are being meet within the established time frames. All financial documentation is reviewed at least once per year and all sub-recipients are subject to random program audits as well as mandatory annual audits as required.

1.3.3. Describe the activities the Lead Agency will have in place to identify program violations and administrative error to ensure program integrity using the chart below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to **areas identified through the Error Rate Review** process (98.100). Check which activities, if any, the Lead Agency has chosen to conduct.

Type of Activity	Identify Program Violations	Identify Administrative Error
Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid))	☑	☐
Share/match data from other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))	☑	☐
Run system reports that flag errors (include types)	☑	☑
Review of attendance or billing records	☑	☑
Audit provider records	☑	☑
Conduct quality control or quality assurance reviews	☑	☑
Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents	☑	☑
Conduct supervisory staff reviews	☑	☑

Conduct data mining to identify trends	☑	☐
Train staff on policy and/or audits	☑	☑
Other. Describe	☐	☐
None	☐	☐

For any option the Lead Agency checked in the chart above other than none, please describe:

Share/match data from other programs
Lead Agency utilizes a data match with ICES (Indiana Client Eligibility System) to verify Indiana Manpower Placement and Comprehensive Training   (Impact) participants receiving child care benefits have active cases .. .

Share/Match data from other databases
The lead Agency participates in the PARIS matches.

Run system reports that flag errors
We have the ability to run several Quality Assurance reports within the Indiana Child Care Information System(CCIS) to identify possible errors.

Review of attendance or billing records
FSSA Audit reviews attendance and billing based on data mining for program violations and possible repayments. FSSA audit performs both desk audits and on-site visits to identify possible administrative and intentional errors. Written attendance records are matched with swipe card data to confirm accuracy. Unauthorized costs are required to be paid back to the Lead Agency.

Audit provider records
FSSA Audit makes visits and requests documents from CCDF providers and audits attendance records based on swipe activity and payments.

Conduct quality control or quality assurance reviews
Intake agents are given 21 days to QA review CCDF cases for errors prior to scanning the required documentation into AIS. The Lead Agency then utilizes contracted monitors to   remotely review CCDF cases for program violations and administrative errors. The Lead Agency also conducts a secondary review of a sample of cases.
Additional quality control reviews are completed on the CCIS database to ensure data accuracy.

Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents
FSSA Audit visits CCDF providers, Agreement Centers and Intake Agents in order to review attendance records and enrollmen documents to compare against swipe activity and
payments. Lead Agency conducts onsite visits, monthly, and annual reviews of other program areas to ensure program integrity.

Conduct supervisory staff reviews
The Lead Agency staff review a percentage of CCDF cases after they have been monitored. Supervisory approval is required for new licensed/registered/certified child care providers entering the CCDF payment system.

Conduct data mining to identify trends
The Lead Agency and FSSA Audit conducts data mining to identify trends.

If the Lead Agency checked none, please describe what measures the Lead Agency has or plans to put in place to address program integrity:

1.3.4. What strategies will the Lead Agency use to investigate and collect improper payments due to program violations or administrative error? Check and describe in the chart below which strategies, if any, the Lead Agency will use for each of the following areas: Unintentional program violations (UPV), intentional program violations (IPV) and/or fraud, and administrative error as defined in your State/Territory. **The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud (98.60(i)).**

Strategy	UPV	IPV and/or Fraud	Administrative Error
Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount: $ 1	☑	☑	☐
Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement). Describe: Repayments and restitution are sent to the Indiana Department of Revenue for tax intercept after being 90 days delinquent. FSSA Compliance Division investigates allegations of fraud and intentional program violations and will refer to local law enforcement as appropriate.	☑	☑	☐

Recover through repayment plans	☑	☑	☐
Reduce payments in the subsequent months	☑	☑	☐
Recover through State/Territory tax intercepts	☑	☑	☐
Recover through other means. Describe:	☐	☐	☐
Establish a unit to investigate and collect improper payments. Describe composition of unit: The Compliance Division investigates CCDF fraud referrals	☑	☑	☐
Other. Describe: *Court ordered restitution*	☐	☑	☐
None	☐	☐	☐

For any option the Lead Agency checked in the chart above other than none, please describe:

Require recovery after a minimum dollar amount in improper payment
   The Lead Agency makes every effort to recover any amount that was paid out improperly.

Coordinate with and refer to other State/Territory agency
    Repayments and restitution are sent to the Indiana Department of Revenue for tax intercept after being 90 days delinquent. FSSA Compliance Division investigates allegations of fraud and intentional program violations and will refer to local law enforcement as appropriate.

Recover through repayment plans
   The Lead Agency sets up repayment plans with parents and providers to recoup CCDF funds that were paid out through unintentional or intentional program violations. There is a written repayment agreement and an appeal procedure for both parents and providers.

Reduce payments in the subsequent months
   If a provider has recieved an overpayment, the provider can select to have their CCDF payments reduced.

Recover through State/Territory Tax intercept
   If a parent becomes delinquent on a repayment agreement that cannot be remedied, for more than 90 days, the delinquency is sent to the Department of Revenue for tax intercept.

Establish a unit to investigate and collect improper payments.
   The FSSA Compliance Division investigates CCDF fraud referrals

Other
   The Lead Agency works with the FSSA Finacial Management Division and the Indiana Attorney General's office to collect on court ordered restitutions. to to

1.3.5. What type of sanction, if any, will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

☐ None
☑ Disqualify client.
If checked, please describe, including a description of the appeal process for clients who are disqualified

The Intake Agent must inform the applicant of the Parent Appeal Process at time of initial applicant and at each re-determination.
When any adverse action is taken, such as denial, termination or increased co-pay, there is a three (3) step appeal process.
*STEP 1: Within **ten calendar days** of receipt of Adverse Action letter, the applicant must send written request for appeal to the local Intake Agent Supervisor. The Intake Agent has **ten calendar days** to review the request and respond in writing. This response must provide information on the next step in the appeal process. The Intake Agent will document research to support any decision made. The documentation shall be placed into the parent file.*

*STEP 2: If the applicant is not satisfied with the decision of the Intake Agent Supervisor, the applicant must send written request for appeal to the Child Care Administrator of the Bureau of Child Care within **15 calendar days** of receipt of the denial letter from the Intake Agent Supervisor.*
*The Child Care Administrator has **15 calendar days** to review the request and respond in writing. This response must provide information on the next step in the appeal process.*

*STEP 3: If the applicant is not satisfied with the decision of the Child Care Administrator, they have **15 calendar days** from receipt of letter from the Child Care Administrator to submit a final written request for appeal. The Division Director of DFR has **15 calendar** days to review the decision of the Child Care Administrator of the Bureau of Child Care and respond in writing.*

☑ Disqualify provider.
If checked, please describe, including a description of the appeal process for providers who are disqualified

In situations where the Division of Family Resources takes adverse action (other than CCDF Provider Eligibility Standards) against a provider that affects their ability to participate in the CCDF program, there is a two-step appeal process.

*STEP 1 Within **15 calendar days** of receipt of termination notice, the provider must send a written request for appeal.*
*The Child Care Administrator has **15 calendar days** to review the request and respond.*

*STEP 2 If the provider is not satisfied with the decision of the Child Care Administrator, they have **15 calendar days** to submit a **final written** request for appeal.*
*The Director has **15 calendar days** to review the decision of the Child Care Administrator of the Bureau*

of Child Care and respond in writing.

☑ Prosecute criminally
☑ Other.
Describe.

On the first occurrence of a program violation families will receive a warning letter. Families may be required to attend additional training on CCDF policies and procedures and will be required to sign an updated agreement. Providers will also receive warning letters, be required to submit a Plan of Correction and may receive additional training on CCDF policy and procedures. Both families and providers are also subject to required repayments. The appeal process for repayments is below.

Repayment Appeal Process:

As a CCDF recipient or CCDF child care provider for the State of Indiana, you have the right to appeal any overpayment finding that is identified. Any recipient/provider exercising this right must follow the procedures outlined below.

Within 30 days of the date of repayment notification:

- *submit the total remittance;*
- *reach an agreed upon monthly repayment plan with the Bureau of Child Care; or*
- *appeal the finding following the procedures outlined below.*

APPEAL PROCEDURES:

Level I – Bureau of Child Care Appeal

Submit a written request for appeal of the determined repayment, with appropriate supporting documentation, to the Child Care Administrator, Bureau of Child Care. Appeals must be received within thirty (30) days of the date of repayment notification.

The appeal will be reviewed by the Child Care Administrator and a written decision, to approve, deny or partially approve, will be provided within thirty (30) days of receipt of the appeal.

If the recipient/provider does not submit a written appeal to the Bureau of Child Care within the 30-day time frame, a certified letter will be issued to the recipient/provider explaining the actions that will be taken to recover the repayment.

Level II Appeal- Audit Services Section

1.If the recipient/provider receives an adverse decision to the Level I appeal, a Level II appeal may be requested within thirty (30) days of receipt of the Bureau of Child Care decision. This appeal must be submitted in writing to the Chief Audit Executive, Audit Services Section. This request is submitted to the Child Care Administrator for processing.

Two (2) copies of the Level II appeal and one (1) copy of the supporting documentation must be submitted with the written request for a Level II appeal.

The Level II appeal will be reviewed by the Chief Audit Executive and a written decision will be provided the recipient/provider within ninety (90) days of receipt of the appeal. The decision of the Chief Audit Executive is final.

1.3.6 Based on responses provided from Question 14 in the most recent ACF-402 report, please describe those actions the Lead Agency has taken or plans to take to reduce identified errors in the table below. Territories not required to complete the Error Rate Review should mark

Activities identified in ACF-402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)

A written report was sent to each Intake Agency detailing all errors that were discovered during the review of their sample case files. Follow up conference calls were conducted to address the errors. Intake Agents were requested to correct all errors and in the cases of ineligible cases, were required to make a repayment as detailed in their contract. Onsite technical assistance was provided to each Intake Agency. State CCDF Policy Consultants and Intake Agency staff jointly reviewed their agency errors, as well as the policies pertinent to that error. Additionally, time was allocated during the regularly scheduled Intake Agent bi-weekly conference calls to address the errors that were identified during the Improper Payment Review. The current monitoring process in which the Lead Agency utilizes the AIS system and the scanned eligibility case files to remotely monitor 100% of all child care cases within a 60 day time period is being refined to address specific errors found during the review as well as on the ten error categories which could potentially cause of case to be ineligible.	Missing Documentation Incorrect co-payment	To correct missing documentation errors an additional percentage of approved monitored cases will be second party reviewed by a member of the BCC staff. The Case File Monitoring User Manual will be revised with additional information about common missing documentation. Additional monitoring guidelines will be drafted regarding commonly missing documentation. Intake Agencies will receive additional training on common missing documentation. To reduce co-payments errors, monitoring of co-payments calculations will be enhanced. A percentage of approved monitored cases will be second party reviewed by a member of the BCC staff. BCC staff will be checking the co-payment calculations. The Case File Monitoring User Manual revision will be completed and updated list of monitoring guidelines will be released. Intake Agencies will receive additional training on co-payments. A percentage of monitored and approved cases will be second party reviewed by a member of the BCC staff beginning August 1, 2011. The Case File Monitoring User Manual will be revised and an updated list of monitoring guidelines will be completed by October 1, 2011 to insure that all critical eligibility information is adequately reviewed. Intake Agent Trainings will be conducted by October 1, 2011. These trainings will focus on highest areas of	Missing Documentation August 1,2011-BCC review Co-payments- July 1, 2011 Include co-payment review in monitoring process. August 1,2011-BCC review October 1, 2011 for manual revision and training

		concerns discovered in the Federal review. Monitoring of 100% of case files within 60 days will continue. This monitoring will provide vital data on the performance of intake agencies and will highlight specific eligibility errors that may be on-going. Intake agencies which do not have 97% accuracy rate (as per their contract) will be put on a corrective action plan and their contract could be terminated if their accuracy rate does not improve. In addition to the case file reviews, additional monitoring will be conducted using second party case reviews to insure that the monitors are accurately reviewing case files and making correct error determinations. Any deficiencies found in an individual monitor or by the team will be addressed through retraining and disciplinary actions as necessary.	

1.4 Consultation in the Development of the CCDF Plan

Lead Agencies are required to *consult* with appropriate agencies in the development of its CCDF Plan (§98.12, §98.14(a),(b), §98.16(d)).

Definition: *Consultation* involves the meeting with or otherwise obtaining input from an appropriate agency in the development of the State or Territory CCDF Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments. (§§98.12(b), 98.14(a)(1))

1.4.1 Identify and describe in the table below who the Lead Agency consulted with in the development of the CCDF Plan (658D(b)(2), §§98.12(b), 98.14(b)).

Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan

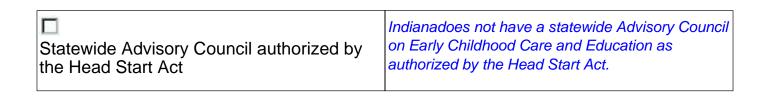|	
☑ **Representatives of general purpose local government (required)** This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies.	*The Bureau of Child Care (BCC) is a member of the Indiana General Assembly Interim Study Committee on Child Care. The Child Care Committee is a legislative committee whose members consist of local child care advocates and local elected officials. BCC consults with this committee on the CCDF State Plan along with other early childhood issues. Additionally, the Lead Agency has met with local elected officials on the Education Interim Study Committee regarding the plan for improving school readiness through child care quality initiatives including Paths to QUALITY, Indiana's QRIS.*
For the remaining agencies, check and describe (optional) any which the Lead Agency has chosen to consult with in the development of its CCDF Plan.	
☑ State/Territory agency responsible for public education This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education.	*BCC consults with the Indiana Higher Education Forum and the Indiana Education Roundtable through regular meetings.*
☑ State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs	*The BCC child care administrator sits on the First Steps Inter-coordinating Council (ICC) and is a member of the transition team of this council. The ICC meets quarterly.*
☑ State/Territory agency responsible for licensing (if separate from the Lead Agency)	*(The licensing section is part of the Lead Agency)*
☑ State/Territory agency with the Head Start Collaboration grant	*The Indiana Head Start Collaboration Director is housed with the Lead Agency which allows close coordination to increase full day, full year Head Start services, on-going alignment of QRIS standards and Head Start Performance Standards and other joint initiatives. Additionally, BCC sits on the Head Start Multi-agency Advisory Council which drafts an annual state wide early childhood needs assessment and strategic plan.*

☐ Statewide Advisory Council authorized by the Head Start Act	*Indiana does not have a statewide Advisory Council on Early Childhood Care and Education as authorized by the Head Start Act.*

☑ Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services	*The lead agency consults regularly with the Indiana Association of Child Care Resource and Referral (IACCRR) and the 11 local R&R agencies to ensure alignment of efforts towards the goals of the CCDF state plan to improve family access to high quality, affordable child care including provider enrollment and mentoring in Paths to QUALTIY, licensed provider recruitment and trainings, community awareness, parent resources and referrals, work-life solutions, better infant care and inclusion training.* *IndianaAssociation for the Education of Young Children (IAEYC) – The Lead Agency Consults with IAEYC on professional development systems planning, provider career counseling and education and professional development training for providers through the TEACH Early Childhood INDIANA project, CDA non formal training, annual Indiana Early Childhood Conference, and provider support for national accreditation.* *Local Health Departments statewide – Local health departments are consulted with on a variety of health concerns related to child care; including immunizations, prevention of illness, prevention of lead poisoning and appropriate actions when unexpected health concerns arise.* *ITSI- the lead agency consults regularly with the Infant Toddler Specialist Network of Indiana on issues contained in the state plan, including Infant Toddler Mental Health, and provider training and education on a variety of IT topics.* *Indiana Infant Toddler Mental Health Association (ITMHA)- the lead agency meets regularly with members of the ITMHA to coordinate efforts included in the state plan such as increasing awareness and trainings opportunities on Infant Toddler mental health and the IT Mental Health Endorsement project.* *The lead agency meets with a variety of school age care organizations including the Indiana Afterschool Network and Indiana Youthpro to coordinate a strategic plan for school age care across the state including the alignment of core knowledge and competencies and standards.* *BCCconsults with Improving Kids Environments (IKE) to improve the safety of children in child care including on the prevention of lead poisoning, carbon monoxide protections, and safe pest*

	management.
☑ State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)	*The BCC child care administrator meets regularly with the director of the Indiana CACFP program to coordinate efforts in improving nutrition within child care programs, grant opportunities, community awareness and program integrity.*
☑ State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant	*The lead agency is a core partner in the ECCS grant, Sunny Start. Sunny Start is providing direction for Indiana's new Maternal and Early Childhood Home Visitation programs grant, including coordination efforts between home visiting and child care.*
☑ State/Territory agency responsible for public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health)	*The Lead Agency coordinates with the Indiana State Department of Health to increase immunization rates. The Lead Agency also participates in the planning initiative with the Maternal and Child Health Division of the Indiana State Department of Health for the comprehensive early childhood plan, Sunny Start (ECCS). BCC is a core member of Sunny Start. The Lead Agency also houses and coordinates with the Indiana Children's Health Insurance Program, Hoosier Healthwise, to increase participation rates..* *The Lead Agency consults with the Indiana Department of Environmental Management on the 5 star environmental health program for child care providers, provider training and community awareness of environmental health concerns within child care facilities.*
☑ State/Territory agency responsible for child welfare	*The Lead Agency meets regularly with the Department of Child Services (DCS) on a variety of issues surrounding the state plan and child welfare, including vouchers for foster families and for children who have been involved with the child welfare system, respite care for families with family reunification plans, as well as on Child Protective Services investigations of abuse and neglect within child care facilities.*
☑ State/Territory liaison for military child care programs or other military child care representatives	*BCC consults regularly with the state liaison for military child care programs to coordinate strategic planning.*
☑ State/Territory agency responsible for employment services/workforce development	*The Lead Agency consults with the Indiana Department of Workforce Development on a variety of workforce issues including encouraging Indiana high school students to consider enter the child care field. BCC has also consulted on the development of career pathways for future child care providers.*

☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF)		*The lead agency is housed with the agency responsible for TANF and consults with the TANF office frequently on issues contained within the CCDF state plan.*
☑	Indian Tribes/Tribal Organizations	*The lead agency has been in contact with the tribe with members in Indiana regarding market rates.*
	☐ N/A: No such entities exist within the boundaries of the State	
☑ Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21		*BCC is a member of the Indiana Ready to Earn and the Indiana Success by Six committees, both under United Way leadership, on strategic planning to improve access to high quality child care, child outcomes and school readiness measures.*
☑ Provider groups, associations or labor organizations		*BCC meets at least quarterly with three child care provider advisory groups representing licensed homes, licensed centers, and unlicensed registered child care ministries on many issues including the CCDF state plan*
☑ Parent groups or organizations		*BCC consults regularly with the Indiana Partnership Information Center (IPIC), a statewide organization designed to provide information and training to parents. Additionally, BCC meets with the Indiana Parents as Teachers (PAT) through the Sunny Start Core Partners meetings on a variety of early childhood issues.*
☑ Local community organizations (child care resource and referral, Red Cross)		*BCC consults with several local community organizations including McCoy, the Children's Coalition, The Early Years Count, on implementation of activities within the state plan.*
☑ Other		*The Indiana Nurse Health Consultant Program is housed within the lead agency and works with local communities by offering free onsite training related to health issues within child care facilities including immunizations, medication dispensing, asthma, lead poisoning, nutrition and meal planning.*

1.4.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. (658D(b)(1)(C), §§98.14(C)). At a minimum, the description should include:

a) Date(s) of notice of public hearing: 05/16/2011

Reminder - Must be at least 20 days prior to the date of the public hearing.

b) How was the public notified about the public hearing? A public notice was sent out to newspapers across the State and the notice was also posted on www.childcarefinder.IN.gov along with the draft of the State Plan. c) Date(s) of public hearing(s): 06/14/2011
Reminder - Must be no earlier than 9 months before effective date of Plan (October 1, 2011).

d) Hearing site(s) Scott County Partners, Lifelong Learning Center 1092 W Community Way, Scottsburg IN;English Foundation Bldg, 615 N Alabama Conference Rooms 6 and 7 Indianapolis IN; Mishawaka-Penn_Harris Public Library Harris Branch 51446 Elm Rd Granger IN
e) How was the content of the Plan made available to the public in advance of the public hearing(s)? The State Plan is posted on the Bureau of Child Care website www.childcarefinder.IN.gov and a request can be made to have a copy of the State Plan mailed.
f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? All comments from the public hearings and all written comments received will be taken into consideration in regards to the final draft of the State Plan. 1.4.2 a) 06/14/2011/06/15/2011

1.4.3. Describe any strategies used by the Lead Agency to increase public consultation on the Plan or access to the public hearing. For example, translating the public hearing notice into multiple languages, using a variety of sites or technology (e.g., video) for the public hearing, holding the hearing at times to accommodate parent and provider work schedules.
1.4.3. Describe:

The hearings are scheduled at three different locations across the State, north, central and south. The hearing times are scheduled in the evening to accommodate work schedules for families and providers. The state plan and the notices of public hearings are posted on the Bureau of Child Care's website at www.childcarefinder.IN.gov.

1.5. Coordination Activities to Support the Implementation of CCDF Services

Lead Agencies are required to *coordinate* with other Federal, State, local, Tribal (if applicable) and private agencies providing child care and early childhood development services
Definition - *Coordination* involves child care and early childhood and school-age development services efforts to work across multiple entities, both public and private (such as in connection with a State Early Childhood Comprehensive System (SECCS) grant or the State Advisory Council funded under the Head Start Act of 2007). (658D(b)(1)(D), §§98.12(a), 98.14(a)(1))

1.5.1. Identify and describe in the table below with whom the Lead Agency coordinates in the delivery of child care and early childhood and school-age services (§98.14(a)(1)).

Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe the goals or results you are expecting from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
☑ Representatives of general purpose local government **(required)** This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies.	*The Bureau of Child Care (BCC) is a member of the Indiana General Assembly Child Care Committee. The Child Care Committee is a legislative study committee. Its members consist of local child care advocates and local elected officials. BCC Consults with the committee on the CCDF State Plan, including Indiana's QRIS and the administration of the CCDF voucher program, along with other child care related concerns including regulation, workforce issues and school readiness.*	*Goals include increased understanding of the CCDF program and the important role that the CCDF program plays in the future self sufficiency of low income families, increased community awareness and recognition of the importance of high quality child care; increased awareness of the role that high quality child care plays in school readiness and the quality of the present and future workforce, and increased understanding of the disparity among child care regulations. The committee makes recommendations to the Indiana General Assembly on legislation to strengthen the standards on the health, safety and learning of children in out of home care throughout the state.*

☑	State/Territory agency responsible for public education **(required)** This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education.	*The Lead Agency partners with the IDOE on multiple initiatives including improving transitions to Kindergarten; improving school readiness by alignment of the Early Learning Guidelines and the QRIS standards; improving future reading success by implementing a literacy framework for birth to age 5; providing mentoring, coaching and training on school readiness topics. Additionally the lead agency partners with numerous school age programs and organizations to ensure that young children have out of school care that is safe, promotes children's health and supports and enhances their learning. The lead agency coordinates with the Indiana Higher Education Forum to develop and support articulation agreements across high school, non formal, associates and bachelors programs.* *IDOE, school age organizations, and higher education each sit on numerous committees for BCC including the Paths to QUALITY Stakeholders group and the Provider Resources and Professional Development Committee to ensure alignment and coordination among programs.*	*Goals for this partnership include improved child care program quality through the enhancement of available training and technical assistance to Indiana's child care providers on the Indiana Early Learning Guidelines and the literacy framework; mentoring child care providers to ensure that care promote school readiness and to ensure that early language development and pre-literacy skills are being supported; promoting positive transitions from child care to kindergarten by promoting and supporting community based coordination between child care and education programs with local school systems.* *The collaboration with school age child care programs seeks to ensure the alignment of the core knowledge and competencies, standards and trainings, and to promote high quality school age care by increasing the number of individuals with the Indiana Youth Development Credential and the National Afterschool Accreditation.* *The Lead Agency's work with the Indiana Higher Education Forum will result in an increased number of articulation agreements to ensure that Indiana child care providers can maximize their educational opportunities and have a clearly defined career pathway.*

☑	Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services **(required)**	*The Lead Agency partners with the Indiana Association for Child Care Resource and Referral (IACCRR) extensively on the implementation of the state plan, including QRIS enrollment and onsite mentoring, provider training and technical assistance including Better Baby Care and the Inclusion specialist, parent referrals and assistance, community awareness, public private partnerships at the local level, and data collection.*	*The goals of this partnership include each of the unique IACCRR project deliverables including; Better Baby Care training, director training, safe sleep training, and other trainings targeted to the needs of providers in the local areas. Additionally, increased Paths to QUALITY enrollment, mentoring, training and supports to assist providers in increasing through the levels of PTQ, and provider recruitment to ensure high quality options to families in each county. Other goals include increased community collaboration such as partnership with the local Intake and TANF offices to ensure that low income families have awareness of and access to R&R services and information regarding Paths to QUALITY. Other goals include increase community awareness on the importance of high quality child care and increased public private partnerships to support these goals.*
		Indiana Association for the Education of Young Children (IAEYC) – The Lead Agency coordinates with IAEYC for professional development and training for providers through the TEACH Early Childhood INDIANA project, CDA non formal training, annual Indiana Early Childhood Conference, and provider support for national accreditation.	*The collaborative efforts with IAEYC include professional systems development work, increased access to higher education opportunities through T.E.A.C.H scholarships. and CDA training, increased articulation agreements and an increase in child care programs obtaining accreditation and the highest level of PTQ, through the quality advisors and support offered by IAEYC to level 3 and level 4 Paths to QUALITY providers.*
		Local School Districts – School age child care grants are administered by the Lead Agency. Grants are coordinated with local school corporations and area school age child care providers. *The Lead Agency also partners with local school districts to promote positive transitions for children.*	*The school age child care grants (SACC) increase the access for low income families to high quality out of school care providers in communities throughout the state.* *Additional partnerships with local school systems seek to increase collaborative partnerships between child care programs and school districts to promote school readiness, smooth transitions and a comprehensive approach to meeting the needs of children.*
		Department of Homeland Security - The Lead Agency also coordinates with the State Fire Marshal to reduce wait time for child care license inspections and	*The goal of this partnership is to promote safety within child care programs by ensuring that child care programs are meeting the appropriate*

	address issues of health and safety.	*fire safety regulations.*
	The Lead Agency coordinates with local health departments on immunizations and other health issues including the prevention of lead poisoning and when a local health conditions exists.	*Goals include increased to information and resources to families and child care providers regarding issues that impact children's health and safety and better outcomes for children.*
	Higher Education – The lead agency partners with Higher Education on numerous initiatives including the Higher Education Forum and articulation agreements and scholarship opportunities for child care professionals, the Purdue University extension offices throughout the state to provide trainings and outreach, higher education supports the Infant Toddler Specialist Network (Indiana and Purdue University), support of the Early Childhood Meeting Place (Indiana University Institute on Disability and Community), development of the Child Care Collection videos(Ball State University), develop online trainings on the Early Learning Guidelines (Ball State University), Ongoing evaluation of Paths to QUALITY (Purdue University).	*This collaboration seeks to increase and align professional development opportunities for child care professionals through information sharing, articulation agreements, alignment of curricula with the core knowledge and competencies and the early learning guidelines resulting in increased high quality professional development and educational opportunities for child care professionals. These increased PD opportunities will result in improved quality of care for children.*

☑	State/Territory agency responsible for public health **(required)** This may include, but is not limited to, the agency responsible for immunizations and programs that promote children's emotional and mental health	*The Lead Agency coordinates with the Indiana State Department of Health to increase immunization rates, prevent childhood obesity, support and encourage breast feeding, prevent lead poisoning, promote developmental screenings* *BCC is also partnering with the ISDH and Indiana Prenatal Network on training for providers on how to support and encourage breastfeeding.* *The Lead Agency participates in the planning initiative with the Maternal and Child Health Division of the Indiana State Department of Health for the comprehensive early childhood plan, Sunny Start (ECCS). Lead Agency staff has participated at both the core partner level and at the subcommittee work group level.* *The Lead Agency also houses and coordinates with the Indiana Children's Health Insurance Program, Hoosier Healthwise, to increase participation rates.*	*Goals of this collaboration include increase immunization rates, increased use of medical homes, prevention of lead poisoning and prevention of childhood obesity by providing additional information, resources and training to families and providers.* *These efforts will result in more positive health measures among children.* *Sunny Start seeks to promote and facilitate a comprehensive system of services for children. The Lead Agency is an active partner in Sunny Start. These coordinated efforts increase the effectiveness of individual agency efforts and increases access to services for families.*
☑	State/Territory agency responsible for employment services / workforce development **(required)**	*The Lead Agency coordinates with the Indiana Department of Workforce Development in their efforts to provide employment services for TANF families. These families have priority for CCDF child care services to increase work participation rates.*	*Goals include streamlined services for TANF Impact families, increased information to families about the importance of high quality child care and the Paths to QUALITY system, and eventual self-sufficiency for families*
☑	State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) **(required)**	*The Lead Agency also administers the TANF program. CCDF coordinates with TANF by allowing priority referrals for child care to increase the success of welfare to work efforts.*	*Goals include streamlined services for families, increased information to families about the importance of high quality care and how to locate a Paths to QUALITY provider, and eventual self-sufficiency for families.*
☑	Indian Tribes/Tribal Organizations (required) ☐ N/A: No such entities exist within the boundaries of the State	*The Lead Agency conducts the Market Rate Survey and shares these with the Pokagon Band of Potawatomi Indians*	*Results of this coordination include increase information sharing and resources for Hoosier families and child care professionals.*

For the remaining agencies, check and describe (optional) any with which the Lead Agency has chosen to coordinate early childhood and school-age service delivery			
☐	State/Territory agency responsible for licensing (if separate from the Lead Agency)	*The Lead Agency is responsible for licensing activities*	
☑	State/Territory agency with the Head Start Collaboration grant	*The Indiana Head Start Partnership Collaboration Office is housed with the Lead Agency which allows close coordination to increase full day, full year Head Start services and alignment of standards across the Head Start Performance standards, licensing, and QRIS standards, and joint training opportunities.*	*Goals include increased coordination of training and professional development opportunities for providers, Increased Head Start participation in licensing and Paths to QUALTIY, reduction in any duplication of efforts and streamlining services for families.*
☐	Statewide Advisory Council authorized by the Head Start Act	*Indiana does not have a Statewide Advisory Council.*	
☑	State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)	*Indiana Department of Education – The Lead Agency coordinates with the CACFP director by sharing data on child care providers, coordinating training, and promoting awareness of both programs among early care and education providers*	*The goals of this collaboration include increasing program compliance for both CACFP and CCDF, increased participation in the CACFP program among all types of child care providers, increased nutritional quality of food served within child care programs, alignment of training efforts and to ensure that duplication of efforts does not exist.*

☑	State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs	*The lead agency coordinates with the Part C program, First Steps, to promote awareness among child care providers on developmental screenings and the First Steps program. BCC also coordinates with the Indiana University Institute of Disability and Community on the Early Childhood Meeting Place, Sunny Start, and the Indiana Association of Child Care Resource and Referral to increase options for inclusion through an Inclusion Specialist housed at each of the 11 CCRR Service Delivery Areas (SDA's) across the state. These specialists support a required training for all directors of licensed child care centers; provide regular training for all interested child care providers in their service area, and help develop a regional network of child care provider support meet the needs of children who may need additional diagnostic and ongoing support.*	*Results of these efforts include strengthening a comprehensive system of services to families that includes developmental screenings, First Steps services, smooth transitions to local school systems, partnerships with child care providers, and utilizing the CCR&R Inclusion Specialists to promote more positive outcomes for children and families.*
☑	State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant	*The lead agency coordinates with Indiana home visiting programs, including involvement in the implementation of the Maternal and Early Childhood Home Visitation programs grant to promote cross system awareness and to identify possible areas for future work.*	*Goals of this collaboration include increased awareness among the families participating in home visiting on the importance of high quality child care to their children's future success, how to locate a high quality child care provider, what supports are available for low income families including CCDF vouchers and sliding fee scales and increases awareness of the local R&Rs.*

☑	State/Territory agency responsible for child welfare	*Local Office of the Department of Child Services – Consultation with local office staff occurs around issues of child abuse or neglect, Safe Sleep training, and use of the voucher program to support children and families who are involved in the child welfare system. BCC performs checks of the Child Protection Index to ensure that child care providers do not have past substantiations of abuse and/or neglect that would prevent them from working with children.*	*This collaboration seeks to streamline services to support Indiana's children who are at high risk for development delays and future academic failure by supporting families involved with the child welfare system to the greatest extent possible.* *Additional goals include cross system communications that allows BCC to be aware of both ongoing CPS investigations within child care programs and past substantiations of abuse and neglect on potential child care providers to ensure that children in out of home care are protected from possible future harm.*
☑	State/Territory liaison for military child care programs or other military child care representatives	*BCC meets regularly with the State Liaison for military child care programs on strategic planning.*	*The goals of this collaboration include increased awareness about the child care assistance support available to Hoosier military families and to improve the access to high quality child care programs for military families across the state.*
☑	Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	The Lead Agency is a member of the Success by Six leadership team.	The goal of the Success by Six initiative is to provide children with the skills and support that they need for school readiness and future success. This includes support for child care providers so that children in out of home care are in high quality environments that support optimal development.

☑	Local community organizations (child care resource and referral, Red Cross)	*BCC partners with a variety of local agencies including local early childhood initiatives, local foundation work, and local community organizations such as McCoy and the Children's Coalition.*	*The outcomes of many BCC initiatives depend on local support and local community awareness. Families, providers and communities must work within the opportunities offered at the local level. Therefore BCC strives to work in partnership with local community organizations as much as possible to improve service level delivery, streamline services, and leverage funding through public private partnerships. One example of partnership at a community level is the Registered Ministry Quality Improvement partnership which has focused on improving the quality of child care in a local community to improve school readiness. This partnership includes BCC, the United Way of Central Indiana, the local school system, child care providers, Paths to QUALITY, the local R&R, several private businesses and other local community agencies.*
☑	Provider groups, associations or labor organizations	*BCC meets with Provider Advisory Groups quarterly.*	*BCC meets with Provider Advisory Groups quarterly.*
☑	Parent groups or organizations	*The lead agency meets with a variety of Parent organizations including Parents as Teachers, the Indiana Partnership Information Center, IACCRR, and Indiana Parents for Quality Child Care.*	*The goals of this collaboration include increased awareness of the issues and concerns that families have when choosing and using child care and if applicable, the CCDF voucher program.*
☑	Other	*IndianaNurse Health Consultant Program – program housed within the Lead Agency.*	*Goals include an increase in free, onsite trainings for providers on relevant health topics.*

1.5.2. Does the State/Territory have a formal early childhood and/or school-age coordination plan?   Lead Agencies are not required to have an early childhood nor a school-age coordination plan, but the State/Territory may have such plans for other purposes, including fulfilling requirements of other programs.

☐ Yes. If yes,

> a)
> Provide the name of the entity responsible for the coordination plan(s):

> b)
> Describe the age groups addressed by the plan(s):

> c)
> Indicate whether this entity also operates as the State Advisory Council (as authorized under the Head Start Act of 2007):
> ☐ Yes

☐ No

d)
Provide a web address for the plan(s), if available:

☑ No

1.5.3. Does the State/Territory have a designated entity(ies) responsible for coordination across early childhood and school-age programs? (658D(b)(1)(D), §98.14(a)(1)) Check which entity(ies), if any, the State/Territory has chosen to designate.

☐ State/Territory-wide early childhood and/or school-age cabinet/advisory council/task force/commission.

If yes, describe entity, age groups and the role of the Lead Agency

☐ State Advisory Council (as described under the Head Start Act of 2007).

If yes, describe entity, age groups and the role of the Lead Agency

☐ Local Coordination/Council

If yes, describe entity, age groups and the role of the Lead Agency

☑ Other

Describe

The Bureau of Child Care (BCC) has taken the lead role in the coordination efforts between early childhood care and education and out of school time care to design a plan for coordination of efforts across the age continuum of birth -13. These coordination efforts have been accelerated during the ARRA funded quality improvement projects. These quality projects brought together key stakeholders representing all age groups of children including birth to three, preschool, and school age. Future coordination efforts include the Indiana Professional Development Advisory Council. Key stakeholders met in February, 2011 to begin planning the next steps of system building. Membership of this Council includes cross sector key stakeholders representing the birth-13 spectrum. The initial focus of work of this Council will be on enhancing the professional development system to support professionals serving children.

☐ None

1.5.4 Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private sector involvement in meeting child care needs? (§98.16(d))

☑ Yes .

If yes, **describe** these activities or planned activities, including the tangible results expected from the public-private partnership:

In an effort to increase public private partnerships to support high quality child care, economic stability and working families, the Lead Agency supports the Work Life project. The primary efforts of the Work Life project include the following goals:

• Businesses begin to increase their knowledge around the importance of high quality child care and the needs of families as well as school readiness and the impact on economic vibrancy
• Relationships are established and funding opportunities arise to support work at the local and state level
• Businesses become a resource and a catalyst for families to make informed child care decisions

In order to reach these goals the Work Life project will:

• Establish relationships with existing corporations that support high quality child care and early education through meetings, presentations, sharing research and sponsorships both at the local and statewide level
• Approach Foundations that are interested in supporting projects that increase the quality of child care and early education through a statewide database to match local and state agencies with potential funders. Write letters of interests, case statements and grants to support CCR&R work
• Scaffold programs and resources from the private sector to support Indiana's quality rating and improvement system, Paths to QUALITY™

☐ No

1.6. Child Care Emergency Preparedness and Response Plan

It is recommended, but not required, that each Lead Agency develop a plan to address preparedness, response, and recovery efforts specific to child care services and programs. Plans should cover the following areas: 1) planning for continuation of services to CCDF families; 2) coordination with other State/Territory agencies and key partners; 3) emergency preparedness regulatory requirements for child care providers; 4) provision of temporary child care services after a disaster; and 5) rebuilding child care after a disaster. For further guidance on developing Child Care Emergency Preparedness and Response Plans see the Information Memorandum (CCDF-ACF-IM-2011-XX) located on the Office of Child Care website at:
http://www.acf.hhs.gov/programs/ccb/law/state_topic_emergency.htm

1.6.1. Indicate which of the following best describes the current status of your efforts in this area. <u>Check only ONE.</u>

☑ **Planning.** Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.

☐ **Developed.** A plan has been developed as of **[insert date]:** and put into operation as of **[insert date]:** , if available. Provide a web address for this plan, if available:

☐ **Other.**
Describe:

The Lead Agency has coordinated with the Indiana State Department of Health to develop and make available emergency procedural
templates for providers (http://www.in.gov/fssa/carefinder/2750.htm) . These templates are available through the Bureau of Child Care and the Indiana State Department of Health.

The Lead Agency has emergency procedures in place for the CCDF program and child care providers for emergencies such as local flooding, fires within a facility, or inclement weather and power outages.

The Lead Agency is in the process of planning a more detailed, state wide, cross sector emergency preparedness and response plan. The Lead Agency will partner with other state and community stakeholders on the development of this plan and has been in contact with Save the Children for technical assistance.

1.6.2. Indicate which of the core elements identified in the Information Memorandum are or will be covered in the Lead Agency child care emergency preparedness and response plan. Check which elements, if any, the Lead Agency includes in the plan.

☑ Planning for continuation of services to CCDF families

☑ Coordination with other State/Territory agencies and key partners

☑ Emergency preparedness regulatory requirements for child care providers

☑ Provision of temporary child care services after a disaster

☐ Rebuilding child care facilities and infrastructure after a disaster

☐ None

2.1 Administration of the Program

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b), §98.11(a))

2.1.1. Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level? Identify the level at which the following CCDF program rules and policies are established.

Eligibility rules and policies (e.g., income limits) are set by the:

☑ State/Territory
☐ Local entity.
If checked, provide the name(s) of the local entity:

☐ Other.
Describe:

Sliding fee scale is set by the:

☑ State/Territory
☐ Local entity.
If checked, provide the name(s) of the local entity:

☐ Other.
Describe:

Payment rates are set by the:

☑ State/Territory
☐ Local entity.

If checked, provide the name(s) of the local entity:

☐ Other.
Describe:

2.1.2. How is the CCDF program operated in your State/Territory? In the table below, identify which agency(ies) performs these CCDF services and activities.

Implementation of CCDF Services/Activities
Who determines eligibility?   **Note:** If different for families receiving TANF benefits and families not receiving TANF benefits, please describe:

Agency (Check all that apply)

☐ CCDF Lead Agency

☐ TANF agency

☐ Other State/Territory agency.

Describe:

☐ Local government agencies such as county welfare or social services departments

☐ Child care resource and referral agencies

☐ Community-based organizations

☑ Other.

Describe:
The Lead Agency contracts with 10 community based non profit agencies (Intake Agents) around the state. Each of these non profit agencies has a specific region that they determine parent eligibility for the CCDF program.
Who assists parents in locating child care (consumer education)?

Agency (Check all that apply)

☐ CCDF Lead Agency

☐ TANF agency

☐ Other State/Territory agency.

Describe:

☐ Local government agencies such as county welfare or social services departments

☑ Child care resource and referral agencies

☐ Community-based organizations

☐ Other.

Describe:
Who issues payments?

Agency (Check all that apply)

☐   CCDF Lead Agency

☐   TANF agency

☐   Other State/Territory agency.

Describe:

☐   Local government agencies such as county welfare or social services departments

☐   Child care resource and referral agencies

☐   Community-based organizations

☑   Other.

Describe:
The lead Agency contracts with a for-profit company to make payments to CCDF child care providers statewide. These payments are made through direct deposit.
Describe to whom is the payment issued (e.g., parent or provider) and how are payments distributed (e.g., electronically, cash, etc)
Payments are made through electronic deposit to the provider's bank account.
Other. List and describe:

2.2. Family Outreach and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a)-(e). **Note** - For any information in questions 2.2.1 through 2.2.10 that differs or will differ for families receiving TANF, please describe in 2.2.11.

2.2.1. By whom and how are parents informed of the availability of child care assistance services under CCDF? (658E(c)(2)(A), §98.30(a)) Check all agencies and strategies that will be used in your State/Territory.

☑ CCDF Lead Agency
☑ TANF offices
☐ Other government offices
☑ Child care resource and referral agencies
☑ Contractors
☑ Community-based organizations
☐ Public schools
☑ Internet

(provide website): www.childcarefinder.IN.gov

☑ Promotional materials
☑ Community outreach meetings, workshops or other in-person meetings
☑ Radio and/or television
☑ Print media
☐ Other.
Describe:

[blank text box]

2.2.2. How can parents apply for CCDF services? Check all application methods that your State/Territory has chosen to implement.

☑ In person interview or orientation
☑ By mail
☑ By Phone/Fax
☐ Through the Internet
(provide website):

☑ By Email
☐ Other.
Describe:

2.2.3. Describe how the Lead Agency provides consumer education to parents applying for CCDF assistance to promote informed choices about the quality of care provided by various providers.

Lead Agencies must certify that the State/Territory will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices (658E (c)(2)(G), §98.33).

For example, memorandums of understanding with resource and referral agencies to provide consumer education to families applying for CCDF assistance, providing parents with provider lists showing licensing history and/or Quality Rating and Improvement System (QRIS) ratings, or informational brochures that address importance of quality and different care options available.

The Lead Agency utilizes multiple approaches to ensure that families receive consumer education materials that promote informed child care choices.

Families applying for the CCDF program and clients receiving CCDF benefits receive consumer education information in a variety of formats at multiple points in times. For example, when a family applies for CCDF vouchers and must be placed on the waitlist, the lead agency mails a letter to the family. This letter include information about the importance of their child care choices, the importance of early education, and Paths to QUALITY, Indiana's Quality Rating and Improvement System. Additionally, this letter also give parents information about the services offered by the Child Care Resources and Referral offices and includes contact information for the local office. There is information on the

www.childcarefinder.in.gov website as well. This website is updated frequently with important information for families. Also included in this mailing is a checklist for families to utilize when visiting prospective child care providers.

When CCDF families are notified that there are funds available to enroll their child in the CCDF program, they receive another mailing that included additional consumer education information including a Provider Worksheet with enrollment information, local CCR&R contact information, and additional information about Path to Quality.

When the family receives a copy of their CCDF voucher the Paths to QUALITY level of their provider is displayed on the voucher.

Local CCR&R agencies, CCDF Intake Agents, and other community partners sign a MOU to work together on efforts to support families. Local CCR&R's will often be on-site in TANF Impact offices during TANF Impact enrollment to assist families with their child care choices by providing a presentation on the importance of high quality child care, the Paths to QUALITY system and provide referrals to eligible providers that meet the needs of the families..

Referrals provided by the CCR&R to CCDF families include all types of eligible providers who can provide childcare appropriate for the family's specific needs. The CCR&R maintains childcare information on all licensed homes and centers, registered unlicensed childcare ministries, and legally license exempt providers who have demonstrated compliance with the CCDF minimum standards and are therefore eligible to receive CCDF payments. The CCR&R also provides CCDF families with information on the importance of high quality child care to their children's futures and information about Paths to QUALITY. The CCR&R network also provides non English speakers with resources including a Spanish language referral line and resources on Paths to QUALITY printed in Spanish.

The Lead Agency uses our website, www.childcarefinder.in.gov to provide a great depth of information to families including inspection reports, information on how to find quality child care and the importance of high quality care. Families can also find information about applying for CCDF and details on the CCDF program. The website also includes information for business and community partners.

The Lead Agency has developed multiple consumer education pieces on Paths to QUALITY and the importance of quality child care, including videos, internet advertisements, billboards, television and radio PSAs, webisodes (short videos online that contain information on quality child care and Paths to QUALITY), bookmarks, brochures, and signs for providers to display. The Lead Agency and our partners also utilize social media including Facebook and YouTube to reach families with child care information. The Lead Agency has also partnered on the development of the www.childcareindiana.org website which contains additional information for families and features a free child care search which assist families in locating a list of quality providers in their area in just two mouse clicks.

2.2.4. Describe how the Lead Agency will support child care programs to increase the likelihood that CCDF-served children receive higher quality care as defined in your State/Territory.

For example, methods used to promote upward movement in quality rating and improvement system, methods used to encourage high quality programs to participate in the subsidy program such as tiered reimbursement, or incentives used to support high quality programs in rural, suburban, urban, and low-income communities.

The Lead Agency supports child care programs in a variety of ways designed to increase the availability of high quality child care. The most significant way that providers are supported in their quality improvement efforts is through our Quality Rating and Improvement System, Paths to QUALITY™. This is a voluntary four level rating and improvement system. A wide variety of provider types may join Paths to QUALITY including licensed homes, licensed centers, and unlicensed registered ministries. Each level of the system builds on the previous level(s). Level one is based on the foundation of licensing and level four, the highest level, includes national accreditation.

The Paths to QUALITY system includes significant awards and incentives at every level to encourage providers to participate and increase through the levels. Free on-site mentoring is available to every Paths to QUALITY provider. There are extensive professional development opportunities available including T.E.A.C.H. scholarships and the non-formal CDA project. There are a wide variety of free or low cost trainings available. There is additional support, both cash and non cash awards designed to help providers reach the next Paths to QUALITY level and to maintain the highest level once it is achieved. The Indiana Accreditation Project provides technical assistance, materials and supplies necessary to obtain accreditation and the highest Paths to QUALITY level.

Providers who accept CCDF are given scoring priority when the Lead Agency issues grant opportunities.

The Lead Agency also utilizes tiered reimbursement to encourage providers to reach higher levels of quality. Licensed providers and licensed exempt providers who reach the Voluntary Certification Standards (VCP) receive a higher reimbursement rate. Additionally, providers who obtain national accreditation by one of the State approved accrediting bodies receive a higher reimbursement rate.

2.2.5. How will the Lead Agency promote access to the CCDF subsidy program?
Check the strategies that will be implemented by your State/Territory.

☑ Provide access to program office/workers such as by:
☑ Providing extended office hours
☑ Accepting applications at multiple office locations
☑ Providing a toll-free number for clients
☑ Other.
Describe:

offer walk in hours, email, scheduling face to face appointments in clients' preferred county.

☑ Using a simplified eligibility determination process such as by:
☐ Simplifying the application form (such as eliminating unnecessary questions, lowering the reading level)
☐ Developing a single application for multiple programs
☑ Developing web-based and/or phone-based application procedures
☐ Coordinating eligibility policies across programs.
List the program names:

☑ Streamlining verification procedures, such as linking to other program data systems

☑ Providing information multi-lingually

☑ Including temporary periods of unemployment in eligibility criteria for new applicants (job search, seasonal unemployment).

Length of time: 13 weeks for job search

☐ Other.
Describe:

☐ Other.
Describe:

☐ None

2.2.6. Describe the Lead Agencies policies to promote continuity of care for children and stability for families. Check the strategies, if any, that your State/Territory has chosen to implement.

☑ Provide CCDF assistance during periods of job search.

Length of time: 13 weeks

☑ Establish two-tiered income eligibility to allow families to continue to receive child care subsidies if they experience an increase in income but still remain below 85% of State median income (SMI)

☐ Synchronize review date across programs
List programs:

☐ Longer eligibility re-determination periods (e.g., 1 year).
Describe:

☐ Extend periods of eligibility for families who are also enrolled in either Early Head Start or Head Start and pre-k programs.
Describe:

☐ Extend periods of eligibility for school-age children under age 13 to cover the school

year.
Describe:

☑ Minimize reporting requirements for changes in family's circumstances that do not impact families' eligibility, such as changes in income below a certain threshold or change in employment

☐ Targeted case management to help families find and keep stable child care arrangements

☐ Using non-CCDF Funds to continue subsidy for families who no longer meet eligibility, such as for children who turn 13 years of age during the middle of a program year

☐ Other.
Describe:

☐ None

2.2.7. How will the Lead Agency provide outreach and services to eligible families with limited English proficiency? Check the strategies, if any, that your State/Territory has chosen to implement.

☐ Application in other languages
☑ Informational materials in non-English languages
☑ Training and technical assistance in non-English languages
☐ Website in non-English languages
☑ Lead Agency accepts applications at local community-based locations
☑ Bilingual caseworkers or translators available
☐ Other.
Describe:

☐ None
(Optional) If the Lead Agency checked any option above related to providing information or services in other non-English languages, please describe the languages offered :

2.2.8. How will the Lead Agency overcome language barriers with providers? Check the strategies, if any, that your State/Territory has chosen to implement.

☑ Informational materials in non-English languages
☑ Training and technical assistance in non-English languages
☐ CCDF health and safety requirements in non-English languages
☐ Provider contracts or agreements in non-English languages
☐ Website in non-English languages
☑ Bilingual caseworkers or translators available
☑ Other.
Describe:

Information about Paths to QUALITY in Spanish

☐ None
(Optional) If the Lead Agency checked any option above related to providing information or services in other non-English languages, please describe the languages offered:

2.2.9. Describe how the Lead Agency documents and verifies applicant information using the table below. (§98.20(a))

Check the strategies that will be implemented by your State/Territory. **Attach** a copy of your parent application for the child care subsidy program(s) as **Attachment 2.2.9** or provide a web address, if available: 805 application

The Lead Agency requires documentation of:	Describe how the Lead Agency documents and verifies applicant information:
☑ Applicant identity	*The applicant must submit one of the following forms of ID during the application process:* *Driver's license* *State ID* *Passport* *Military ID* *School ID* *Work ID* *After the application is complete documents are scanned for internal and State monitoring for accuracy and completeness.*
☐ Household composition	
☐ Applicant's relationship to the child	

☑ Child's information for determining eligibility (e.g., identity, age, etc.)	*One of the following must be submitted for child identity during the initial application process:* **Preferred** *Birth certificate* *Hospital issued certificate of birth* *Birth confirmation letter* *ICES screen* *Permanent Residency Card* **Optional, if it includes child's date of birth** *School enrollment records* *Medical immunization records* *State ID* *One of the following must be submitted for child's date of birth during the application process:* **Preferred** *Birth certificate* *Hospital issued certificate of birth* *Birth confirmation letter* *TANF Referral ICES screen* **Optional, if record includes date of birth** *School enrollment records* *Medical immunization records* *State ID* *After the application is complete documents are scanned for internal and State monitoring for accuracy and completeness.*

☑ Work, Job Training or Educational Program	*At the time of application and recertification the applicant must provide proof of a service need. Service need must be employment, training/education or TANF/IMPACT. The following is the documentation required depending on the service need.* **Work:** EMPLOYMENT/SELF-EMPLOYMENT These activities may be conducted through an employer or considered self-employment and are documented by proof of income. VERIFCATION OF EMPLOYMENT To verify employment, the Intake Agent may accept the following as proof: A current pay stub showing identifying information for applicant /coapplicant, A statement from the applicant's employer which includes: Gross pay Hours worked Date paid Employer's signature EIN number of the business, or on letterhead or includes the A statement of earnings from The Work Number, a wage verification Statement of Profit and Loss or Tax form Schedule C, if not more than six (6) months old as determined A statement from the employer prepared on company letterhead or that Date hired Anticipated work hours per week Employer's signature A single paystub showing identifying information, hours worked and Job Readiness Community Work Experience (CWEP) Post-Secondary Education (including distance learning) Vocational and Educational Training and Academic Training Adult Basic Education (ABE) English as a Second Language (ESL), and General Education Degree (GED) Work / Study. TANF Impact referral Student name School name (may be verified by intake) Credit hours taken and/or hours of participation Semester dates or begin and end date, if applicable Registration form School schedule which may be printed from school website Statement on school letterhead

| ☑ Income | *At the time of application and recertification the applicant must provider proof of all sources of income for the family to see if they meet income eligibility.*

Wages/Employment

WAGES OR SALARY (COMPLETE INCOME)
The total amount of gross earning received for work performed as an employee before deductions are made. Includes, but not limited to:
v Wages / Salaries v Bonuses
v Armed forces pay v Commissions
v All tips recorded on the stub v Piece rate payments
Exception: An applicant should not be penalized if their current income period includes an extra pay date. If an applicant is paid weekly, the applicant's verification shall not exceed four (4) pay stubs, two (2) pay stubs if the client is paid bi-weekly, or one (1) pay stub if the client is paid monthly.
To verify wages, the Intake Agent may accept the following as proof of wages:
Ø A pay stub showing identifying information for applicant/co-applicant, hours worked, and gross wages.
If the pay date is absent from the pay stub, the applicant must declare and document the pay date or provide documentation from employer. The pay date should be documented on the pay stub.
If a pay stub is missing, the Intake Agent may utilize year-to-date wages, if available, to calculate the gross wages of the missing pay stub to determine current income.

If the pay stub is missing hours worked and this can not be determined by gross wages compared to hourly wage, the applicant must provide a signed statement from their employer indicating the hours worked prepared on company letterhead **or** including the employer's Employee Identification Number (EIN) **or** includes the manager's business card.
Ø A statement from the applicant's employer showing identifying information for applicant/co-applicant which includes:
Gross pay
Hours worked
Date paid
Employer's signature
EIN number of the business, or on letterhead or includes the manager's business card
Ø A gross earnings projection provided by the applicant's Impact caseworker in the form of a current referral as documented as monthly income on the AEINC or AEISE screen regardless of age.
Ø A statement of earnings from The Work Number, a wage verification service utilized by specific employers. See www.theworknumber.com to register for this service.
WAGES FROM NEW EMPLOYMENT
If the applicant is employed, but has yet to receive a paycheck for new employment, the applicant must provide, at the time of application, a statement from the new employer prepared on company letterhead **or** includes the EIN number of |

the business **or** has the manger's business card and includes::

Ø Date hired
Ø Anticipated work hours per week
Ø Employer's signature

WAGES FROM SELF-EMPLOYMENT (NON-FARM)

A Self-employed applicant's gross wages are determined by deducting expenses from receipts of a business, professional enterprise, or partnership.

NOTE: Applicants must be able to demonstrate an income (receipts) from selfemployment; however, applicants may incur an operating loss which is reported as "zero" on the application (Form 805). Income for self-employment is calculated by taking the gross receipts minus expenses. Gross receipts include the value of all goods sold and/or services rendered. Expenses include the cost of goods purchased, rent and utilities for the business property, depreciation, wages and salaries paid, interest on loans, and business taxes. Any income or expense considered as such by the Internal Revenue Service (IRS) is considered the same for CCDF purposes (use IRS Tax Schedule C).

The previous year's tax return may be used and averaged over the number of months of employment, however, an additional Profit/Loss statement is required if the Schedule C is more than six (6) months old as determined by fiscal year. An applicant may be asked by the Bureau of Child Care to provide documentation of gross receipts and expenses.

WAGES FROM SELF-EMPLOYMENT (FARM)

The gross income is determined by calculating receipts minus operating expenses form the operation of a farm by a person's own account, as an owner, renter, or sharecropper.

Farming income is calculated by taking the gross receipts minus operating expenses. Gross receipts include the value of all products sold, money received from the rental of farm equipment to others and incidental receipts from the sale of wood, sand, gravel and similar items. Operating expenses include the cost of feed, fertilizer, seed and other farm supplies, wages paid to farm hands, loans, farm building repairs, farm taxes (not state or federal income taxes) and similar expenses. Any income or expenses considered as such by the Internal Revenue Service (IRS) is considered the same for CCDF purposes (use IRS Tax Schedule F).

The previous year's tax return may be used and averaged over the number of months of employment.

Temporary Assistance for Needy Families (TANF)

TANF is money paid as cash assistance to an adult in the assistance group. This source of income should be verified by award letter or ICES screen which is not more than twelve (12) months old.

Other State Funding

These sources of income should be verified by award letter, check stub or other source of

verification from the approving authority.

Housing Assistance/Living Allowance
Housing assistance/allowance are benefits provided to an individual to assist in providing adequate housing for their family. This income may be declared or documented on the applicant/co-applicant's pay stub and is not counted toward eligibility. Examples: military housing, HUD, or religious employment benefits

Food Stamps
Food stamps are benefits paid to an individual for purchase of nutritional items to assist in providing adequate nutrition for their family. This source of income may be declared and is not counted toward eligibility.

SSI or Other Federal Cash Program
SSI is money paid to an individual as cash assistance from Supplemental Security Income. This gross income should be verified by current year's award letter, ICES screen or other source of verification from the approving authority.

Pensions and Annuities
Pensions and annuities are paid to a retired person or his/her survivors by a former employer or union either directly or through an insurance company. This income should be verified by award letter, check stub or other source of verification from the approving authority.

Unemployment
Unemployment is compensation received from government unemployment insurance agencies or private companies during the period of unemployment. This income should be verified by award letter, uplink claimant homepage (https://uplink.in.gov/CSS/CSSClaimantHomePage.htm) or other source of verification from the approving authority. Income is determined by multiplying the weekly benefit amount by the number of payments received in the current period.

Child Support
Child support is money paid on a regular basis by a non-custodial parent for the benefit of his/her child, which includes direct payments and payments via the Clerk of the Circuit Courts and/or the Division of Family Resources, Child Support Bureau. If the child for whom child support is received is listed on the application, the child support is counted regardless of whether the child is receiving CCDF benefits.
The CCDF applicant or co-applicant shall declare the average amount of child support received current period, using the Bureau of Child Care form provided.

Other (Counted)
SOCIAL SECURITY
Insurance payments paid by the Social Security Administration or the U.S. Government to an individual who is age qualified, a survivor of a qualified individual, a permanently disabled

individual, or an individual retired from the railroad. Gross income includes gross benefits received prior to deductions for medical insurance. This income may be verified by current year's award letter, or other source of verification from the approving authority.

MAINTENANCE

Maintenance is an allowance paid to one spouse by the other for support pending or after separation or divorce.

The CCDF applicant or co-applicant shall declare the average amount of maintenance received current period using the BCC form provided.

PROTECTIVE PAYEE

If benefits are issued in someone else's name but for use by the applicant, then the income must be counted. This amount may be declared. I.E., Social Security Benefits, Veterans Benefits. If this income is for a foster child, it is not counted toward eligibility.

VETERAN'S BENEFITS

Veteran's benefits are paid by the Veteran's Administration to disabled members of the armed forces or to survivors of deceased veterans. This income should be verified by award letter, check stub or other source of verification from the approving authority. If a problem occurs in verification of these benefits, the agency may call 1-800-827-1000 to obtain information on VA benefits.

WORKERS COMPENSATION

Compensation received periodically from public or private insurance companies for injuries incurred at work. The cost of this insurance must have been paid by the employer and not the employee. This income may be verified by award letter, check stub or othe r source of verification from the approving authority.

LUMP SUM

Lump sums received through life insurance, Social Security, inheritances, lawsuit settlements, annual employment bonus, gambling/lottery winnings, or etc. are to be annualized.

Calculate: The total amount of the lump sum should be divided by twelve (12) and applied to the application (Form 805) for the next twelve (12) months.

Please note: the applicant may deduct documented legal expenses from the lump sum received.

Other (Not Counted in Elegibilty)
CONTRIBUTIONS

A contribution is money received from a source outside of the applicant's family with no intent to re -pay.

COUNTY/STATE/FEDERAL ADOPTION ASSISTANCE

All Adoption Assistance paid to the parent/guardian of an adopted child should not be counted in calculating monthly gross income and may be declared by the applicant.

EARNED INCOME CREDIT

Earned Income Credit (EIC) is an income tax credit provided to certain low income families which may be advanced to the employee by the employer. These tax credits are not counted

toward eligibility.

FOOD SUBSIDY (MILITARY BAS)
BAS provides sustenance assistance for enlisted personnel is documented on the applicant/co-applicant's pay stub and is not counted toward eligibility.

FOSTER CARE PER DIEM
Foster care per diem is paid by the Family and Social Service Administration to the guardian of a child considered a ward of the court for purpose of providing for the child's immediate needs. This income is not recorded on the application (Form 805).

HEALTH/DENTAL/ VISION INSURANCE BENEFITS CONSIDERED PART OF GROSS INCOME
Health insurance benefits paid as credits on an applicant or co-applicant's pay stub are not counted when there is an opposing deduction for health insurance. These amounts may not match.

TAX REFUNDS AND/OR TAX STIMULUS PAYMENTS
Tax refunds and tax stimulus payments should not be counted in calculating monthly gross income and may be declared by the applicant.

TRAVEL REIMBURSEMENT
Out-of-pocket expenses related to employment and reimbursed on an applicant or co-applicant's pay stub should not be counted. These include mileage, per diems, etc.

WORK STUDY INCOME
Work study grants are not considered income and should not be counted in calculating monthly gross income. Student in a Work/Study program should be reported as participating in an education/training program. Income from Work/Study may be declared.

After the application is complete documents are scanned for internal and State monitoring for accuracy and completeness.

☑ Other. Describe:

residency

The applicant must submit one of the following forms of residency documentation during the application and recertification process:
 Current rent receipt or statement from landlord

Current utility bill based on any of the following: end date of service period, meter reading date or statement date
Lease for existing lease period
Envelope from current mail received at address, including postmark.
Current correspondence received at address from DFR or Impact Service Provider.
Valid INS green card
Current check stub
TANF ICES screen with current print date
Valid driver's license or State ID
Current letter from secondary school documenting the student's registered address
Documentation from a Homeless Shelter or Domestic Violence Shelter

After the application is complete documents are scanned for internal and State monitoring for accuracy and completeness.

2.2.10. Which strategies, if any, will the Lead Agency use to assure the timeliness of eligibility determinations upon receipt of applications?

☑ Time limit for making eligibility determinations.

Describe length of time Every two (2) weeks, the Intake Agent will be notified of an estimated number of Non-TANF IMPACT children who can be added to the program, if funds are available. It is the responsibility of the Intake Agent to notify and enroll children within the next eleven (11) days. Failure to complete enrollment may result in a loss of funds.

☑ Track and monitor the eligibility determination process

☐ Other.
Describe

☐ None

2.2.11. Are the policies, strategies or processes provided in questions 2.1.1. through 2.1.10 different for families receiving TANF? (658E(c)(2)(H) & (3)(D), §§98.16(g)(4), 98.33(b), 98.50(e))

☑Yes.
If yes, describe:

Families receiving TANF who are also participating in an IMPACT
activity are given priority access to the CCDF voucher program. These clients are referred to the local intake agency by their TANF caseworker. The TANF caseworker determines the length of the subsidy period not to exceed 15 weeks. This subsidy period length corresponds to timeframe that the TANF program requires clients to meet with their caseworkers . The TANF caseworker provides a CCDF referral which provides proof of identity, residency, service and financial need. A CCDF client with a TANF referral is not required to show additional documentation to the CCDF Intake Agent, except for a piece of person identification. If there is no funding immediately available, families that receive a TANF only (not Impact) referral are moved to the top of the waitlist.

☐No.

2.2.12. Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement.

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State TANF agency in accordance with section 407(e)(2) of the Social Security Act. In fulfilling

this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE:** The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

a) Identify the TANF agency that established these criteria or definitions:
   State/Territory TANF Agency Division of Family Resources, FSSA

b) Provide the following definitions established by the TANF agency.
   • "appropriate child care": Any child care which is provided in accordance with Indiana law. Appropriate child care is either licensed, registered or legally-license exempt.
   • "reasonable distance": A round trip from home to child care setting is less than two hours in duration by an automobile.
   • "unsuitability of informal child care": Care which has resulted in abuse or neglect of a child or care which is subject to licensure requirements, but is not licensed.
   • "affordable child care arrangements": Any care which is totally subsidized by the agency as TANF recipients are not expected to pay for child care

c) How are parents who receive TANF benefits informed about the exception to individual penalties associated with the TANF work requirements?

☑ In writing
☑ Verbally
☐ Other.
Describe:

2.3. Eligibility Criteria for Child Care

In order to be eligible for services, children must (1) be under the age of 13, or under the age of 19 if the child is physically or mentally disabled or under court supervision; (2) reside with a family whose income is less than 85 percent of the State's median income for a family of the same size; and (3) reside with a parent or parents who is working or attending job training or an educational program; or (4) be receiving or needs to receive protective services. (658P(3), §98.20(a))

2.3.1. How does the Lead Agency define the following eligibility terms?

 residing with -

Families are eligible for child care subsidies when the applicant is the parent of a child who resides with them and the child is under the age of 13 (or through age 18 in cases of special needs).

in loco parentis -

The definition of parent is a person related to the eligible child by blood, marriage, or adoption and including a legal guardian or other person standing in loco parentis (in the place of a parent). In order to apply for CCDF child care, the applicant must have physical custody of the child for whom services are being requested. The applicant must be age
eighteen (18) or over unless the applicant is married, an emancipated minor, or a teenage parent.

2.3.2. Eligibility Criteria Based Upon Age

a) The Lead Agency serves children from 1 weeks to 12 years (maximum age under age 13).

b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care? (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))

☑Yes,and the upper age is 17
Provide the Lead Agency definition of *physical or mental incapacity -*

Children ages 13 through 17 for whom child care is requested due to physical or mental Incapacity must meet the definition of special needs as documented by enrollment in one or more of the following programs or services:

- *Children with special health care services;*
- *Public school special education; or*
- *Supplemental Security Income (SSI)*

☐No.

c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))

☑Yes,and the upper age is 17
☐No.

2.3.3. Eligibility Criteria Based Upon Work, Job Training or Educational Program

a) How does the Lead Agency define "working" for the purposes of eligibility? Provide a narrative description below, including allowable activities and if a minimum number of hours is required.

Reminder - Lead Agencies have the flexibility to include any work-related activities in its definition of working, including periods of job search and travel time. (§§98.16(f)(3), 98.20(b))
working-

A working person is a person receiving wages or salary for performing services for another person or organization or receiving compensation for a service or product. These activities may be conducted through an employer or be considered self-employment and are documented by proof of income. There is no minimum number of working hours required.

b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program? (§§98.16(g)(5), 98.20(b))

☑Yes.
If yes, how does the Lead Agency define "attending job training or educational program" for the purposes of eligibility? Provide a narrative description below.

Reminder - Lead Agencies have the flexibility to include any training or education-related activities in its definition of job training or education, including study time and travel time.

attending job training or educational program -

Training activities may include, but are not limited to, job readiness, community work experience, post secondary education including distance learning, vocational, educational, and academic training, adult basic education, English as a second language and general education degree programs. All educational programs must be completed through a certified or accredited secondary or post secondary training organization/institution. There is no minimum number of participation hours required.

☐No.

2.3.4. Eligibility Criteria Based Upon Receiving or Needing to Receive Protective Services

a) Does the Lead Agency provide child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

☑Yes.
If yes, how does the Lead Agency define "protective services" for the purposes of eligibility? Provide a narrative description below.

Reminder - Lead Agencies have the flexibility to define protective services beyond formal child welfare or foster care cases. Lead Agencies may elect to include homeless children and other vulnerable populations in the definition of protective services.

   Note - If the Lead Agency elects to provide CCDF-funded child care to children in foster

care whose foster care parents are not working, or who are not in education/training activities for CCDF purposes these children are considered to be in protective services and should be included in this definition.

protective services

Families with children who receive or need to receive child protective services as verified by the Local OFC can be eligible for CCDF child care services provided the CPS caseworker indicates the family needs child care out of the child's home. The service and financial need requirements are determined on a case by case basis for children who have been referred by their CPS caseworker as needing out of home care as part of the CPS case plan.

☐ No.

b) Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

☑ Yes,
☐ No.

2.3.5. Income Eligibility Criteria

a) How does the Lead Agency define "income" for the purposes of eligibility? Provide the Lead Agency's definition of "income" for purposes of eligibility determination. (§§98.16(g)(5), 98.20(b))

income -

A family's total income from all countable sources prior to taxes and deductions.

b) Which of the following sources of income, if any, will the Lead Agency exclude from calculations of total family income for the purposes of eligibility determination? Check any income the Lead Agency chooses to exclude, if any.

☑ Adoption subsidies
☑ Foster care payments
☐ Alimony received or paid
☐ Child support received
☐ Child support paid
☑ Federal nutrition programs
☑ Federal tax credits
☑ State/Territory tax credits
☑ Housing allotments, Low-Income Energy Assistance Program (LIHEAP) or energy assistance
☐ Medical expenses or health insurance related expenses

☑ Military housing or other allotment/bonuses
☑ Scholarships, education loans, grants, income from work study
☐ Social Security Income
☐ Supplemental Security Income (SSI)
☐ Veteran's benefits
☐ Unemployment Insurance
☐ Temporary Assistance for Needy Families (TANF)
☐ Worker Compensation
☑ Other types of income
not listed above:

CONTRIBUTIONS
A contribution is money received from a source outside of the applicant's family with no intent to re-pay.

TRAVEL REIMBURSEMENT
Out-of-pocket expenses related to employment and reimbursed on an applicant or co-applicant's pay stub should not be counted. These include mileage, per diems, etc.

HEALTH/DENTAL/ VISION INSURANCE BENEFITS CONSIDERED PART OF GROSS INCOME
Health insurance benefits paid as credits on an applicant or co-applicant's pay stub are not counted when there is an opposing deduction for health insurance.
These amounts may not match.

☐ None

c) Whose income will be excluded, if any, for purposes of eligibility determination? Check anyone the Lead Agency chooses to exclude, if any.

☐ Children under age 18
☐ Children age 18 and over - still attending school
☐ Teen parents living with parents
☑ Unrelated members of household
☐ All members of household except for parents/legal guardians
☑ Other.
Describe:

Earned income for children under the age of 18 years living in the household is excluded from eligibility determinations; however, unearned income is included such as Supplemental Social Security (SSI), TANF and child support.

☐ None

d) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

Reminder - Income limits must be provided in terms of State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. (§98.20(a)(2)). FY 2011 poverty guidelines are available at http://aspe.hhs.gov/poverty/11poverty.shtml.

Family Size	(a) 100% of State Median Income (SMI)($/month)	(b) 85% of State Median Income (SMI)($/month) [Multiply (a) by 0.85]	IF APPLICABLE Income Level if lower than 85% SMI	
			(c) $/month	(d) % of SMI [Divide (c) by (a), multiply by 100]
1	3,077	2,615	1,153	37.5
2	4,024	3,420	1,557	38.7
3	4,970	4,225	1,961	39.5
4	5,917	5,030	2,365	40.0
5	6,864	5,834	2,770	40.4

e) Will the Lead Agency have "tiered eligibility" (i.e., a separate income limit at re-determination to remain eligible for the CCDF program)?

☑Yes.
If yes, provide the requested information from the table in 2.3.5d and **describe below:**

Note: This information can be included in the table below.

Entry is at 127% of Federal Poverty Level (FPL), eligibility limit at redetermination is at 170% of FPL.

☐No.

Family Size	(a) 100% of State Median Income (SMI) ($/month)	(b) 85% of State Median Income (SMI) ($/month)[Multiply (a) by 0.85]	IF APPLICABLE Income Level if lower than 85% SMI	
			(c) $/month	(d) % of SMI[Divide (c) by (a), multiply by 100]
1	3,077	2,615	1,543	50.1
2	4,024	3,420	2,084	51.8
3	4,970	4,225	2,625	52.8
4	5,917	5,030	3,166	53.5
5	6,864	5,834	3,707	54.0

f) SMI Year   2011   and   SMI Source   ACF
(http://www.acf.hhs.gov/programs/ocs/liheap/guidance/in
formation_memoranda/im10-09_ab.html)

g) These eligibility limits in column (c) became or will become effective on:
4/03/2011

2.3.6. Eligibility Re-determination

a) What is the re-determination period upon initial authorization of CCDF services for most families?

☑ 6 months
☐ 12 months
☐ 24 months
☐ Other.
Describe:

☐ Length of eligibility varies by county or other jurisdiction.
Describe:

b) Is the re-determination period the same for all CCDF eligible families?

☐ Yes.
☑ No. If no, **check the categories of families for whom authorizations are different and describe the redetermination period for each.**

☐ Families enrolled in Head Start and/or Early Head Start Programs.
Re-determination period:

☐ Families enrolled in pre-kindergarten programs.
Re-determination period:

☐ Families receiving TANF.
Re-determination period:

☐ Families who are very-low income, but not receiving TANF.
Re-determination period:

☑ Other.
Describe:

c) Does the Lead Agency use a simplified process at re-determination?
☑ Yes.
If yes, describe:

After the initial face to face interview when coming on the CCDF voucher program many clients can complete their redetermination through a mail-in process. For re-determinations proof of date of birth and citizenship are not required again unless adding a child.

☐ No.

2.3.7. Waiting Lists

Describe the Lead Agency's waiting list status. Select **ONE** of these options.

☐ Lead Agency currently does not have a waiting list and:

       ☐ All eligible families *who apply* will be served under State/Territory eligibility rules

       ☐ Not all eligible families *who apply* will be served under State/Territory eligibility rules

☑ Lead Agency has an active waiting list for:

       ☐ Any eligible family who applies when they cannot be served at the time of application

       ☑ Only certain eligible families.

Describe those families:

All eligible families who apply are placed on the waiting list, with the exception that TANF/IMPACT families are served immediately.

☐ Waiting lists are a county/local decision.
Describe:

☐ Other.
Describe:

2.3.8. Appeal Process for Eligibility Determinations

Describe the process for families to appeal eligibility determinations:

The Intake Agent must inform the applicant of the Parent Appeal Process at time of initial applicant and at each re-determination.
When any adverse action is taken, such as denial, termination or I increased co-pay, there is a three (3) step appeal process.

*STEP 1: Within **ten calendar days** of receipt of Adverse Action letter**,** the applicant must send written request for appeal to the local Intake Agent Supervisor. The Intake Agent has **ten calendar days** to review the request and respond in writing. This response must provide information on the next step in the appeal process. The Intake Agent will document research to support any decision made. The documentation shall be placed into the parent file.*

*STEP 2: If the applicant is not satisfied with the decision of the Intake Agent Supervisor, the applicant must send written request for appeal to the Child Care Administrator of the Bureau of Child Care within **15 calendar days** of receipt of the denial letter from the Intake Agent Supervisor.*
*The Child Care Administrator has **15 calendar days** to review the request and respond in writing. This response must provide information on the next step in the appeal process.*

*STEP 3: If the applicant is not satisfied with the decision of the Child Care Administrator, they have **15 calendar days** from receipt of letter from the Child Care Administrator to submit a final written request for appeal. The Division Director of DFR has **15 calendar** days to review the decision of the Child Care Administrator of the Bureau of Child Care and respond in writing.*

2.4. Sliding Fee Scale and Family Contribution

The statute and regulations require Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care (658E(c)(3)(B) §98.42).

2.4.1. Attach a copy of the sliding fee scale as Attachment 2.4.1.

The attached sliding fee scale was or will be effective as of: 04/03/2011

2.4.2. Will the attached sliding fee scale provided as Attachment 2.4.1. be used in all parts of the State/Territory?

☑Yes
☐No.

If no, attach other sliding fee scales and their effective date(s) as **Attachment 2.4.2a, 2.4.2b,** etc.

2.4.3. What income source and year will be used in creating the sliding fee scale? (658E(c)(3)(B)) Check only one option.

☐State Median Income,
Year:
☑Federal Poverty Level,
Year: 2011
☐Income source and year varies by geographic region.
Describe income source and year:
☐Other.
Describe income source and year:

2.4.4. How will the family's contribution be calculated and to whom will it be applied? Check all that the Lead Agency has chosen to use. (§98.42(b))

☐ Fee as dollar amount and
       ☐ Fee is per child with the same fee for each child
       ☐ Fee is per child and discounted fee for two or more children
       ☐ No additional fee charged after certain number of children
       ☐ Fee per family
☑ Fee as percent of income and
       ☐ Fee is per child with the same percentage applied for each child
       ☐ Fee is per child and discounted percentage applied for two or more children
       ☐ No additional percentage applied charged after certain number of children
       ☑ Fee per family
☐ Contribution schedule varies by geographic area.
Describe:

☐ Other.
Describe:

If the Lead Agency checked more than one of the options above, describe:

2.4.5. Will the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

☑ Yes,
and describe those additional factors:

the number of years a family has been on CCDF is also used to determine the family's contribution to the cost of child care.

☐ No.

2.4.6. The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size. (§98.42(c)). Select **ONE** of these options.

Reminder - Lead Agencies are reminded that the co-payments may be waived for only two circumstances - for families at or below the poverty level or on a case-by-case basis for children falling under the definition of "protective services" (as defined in 2.3.4.a).

☐ ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
☑ NO families with income at or below the poverty level for a family of the same size ARE required to pay a fee.
The poverty level used by the Lead Agency for a family of 3 is: 1,544
☐ SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The Lead Agency waives the fee for the following families:

The Lead Agency waives the fee for the following families:

2.5. Prioritizing Services for Eligible Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B), §98.44)

2.5.1. How will the Lead Agency prioritize child care services to children with special needs or in families with very low incomes? (658E(c)(3)(B), §98.44) Lead Agencies have the discretion to define *children with special needs* and *children in families with very low incomes.* Lead Agencies are not limited in defining *children with special needs* to only those children with physical or mental disabilities (e.g., with a formal Individual Education Plan (IEP) required under the Individuals with Disabilities Education Act (IDEA)). Lead Agencies could consider children in the child welfare system, children of teen parents, or homeless children as examples of *children with special needs.*

Children with special needs

Provide the Lead Agency definition of *Children with Special Needs:*

Documentation of a child with special needs must be made by evidence of enrollment in one or more of the following programs or services:
-Children with Special Health Care Services;
-First Steps Early Intervention System;
-Public School Special Education;
-Supplemental Security Income (SSI); or
-Head Start (those professionally diagnosed children with disabilities).
If documentation/verification of enrollment in at least one of the above-indicated programs cannot be obtained, the child will not be considered as a child with special needs until the documentation/verification can be provided. Providers and/or parents cannot self-declare that a child has special needs.

Describe:

Children in families with very low incomes

Provide the Lead Agency definition of *Children in Families with Very Low Incomes:*

Very Low Income level is below 127% of the federal poverty guidelines.

Describe:

How will the Lead Agency prioritize CCDF services for:	Eligibility Priority (Check only one)	Is there a time limit on the eligibility priority or guarantee?	Other Priority Rules
Children with special needs	☑ Priority over other CCDF-eligible families ☐ Same priority as other CCDF-eligible families ☐ Guaranteed subsidy eligibility ☐ Other.	☐ Yes. The time limit is: [　　　] ☑ No	☐ Different eligibility thresholds. Describe: [　　　] ☑ Higher rates for providers caring for children with special needs requiring additional care ☐ Prioritizes quality funds for providers serving these children ☐ Other. Describe: [　　　]
Children in families with very low incomes	☐ Priority over other CCDF-eligible families ☑ Same priority as other CCDF-eligible families ☐ Guaranteed subsidy eligibility ☐ Other.	☐ Yes. The time limit is: [　　　] ☑ No	☐ Different eligibility thresholds. Describe: [　　　] ☑ Waiving co-payments for families with incomes at or below the Federal Poverty Level ☐ Other. Describe: [　　　]

2.5.2. How will CCDF funds be used to provide child care assistance to meet the needs of families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF? (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4)) **Reminder** - CCDF requires that not less than 70 percent of CCDF Mandatory and Matching funds be used to provide child care assistance for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF.

☑ Use priority rules to meet the needs of TANF families (describe in 2.5.1 or 2.5.3.)
☑ Waive fees (co-payments) for some or all TANF families who are below poverty level

☑ Coordinate with other entities (i.e. TANF office, other State/Territory agencies, and contractors)

☐ Other.

Describe:

2.5.3. List and define any other eligibility conditions, priority rules and definitions that will be established by the Lead Agency. (658E(c)(3)(B), §98.16(g)(5), §98.20(b)) Reminder - Lead Agencies are reminded that any eligibility criteria and terms provided below must comply with the eligibility requirements of §98.20 and provided in section 2.2. Any priority rules provided must comply with the priority requirements of §98.44 and provided in section 2.4.1.

Term(s) - Definition(s)

Describe:

None

2.6. Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receives or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A), §98.15(a))

2.6.1. Child Care Certificates

a) When is the child care certificate (also referred to as voucher or authorization) issued to parents? (658E(c)(2)(A)(iii), 658P(2), §98.2, §98.30(c)(4) & (e)(1) & (2))

☐ Before parent has selected a provider

☑ After parent has selected a provider

☐ Other.

Describe:

b) How does the Lead Agency inform parents that the child care certificate permits them to choose from a variety of child care categories, including child care centers, child care group homes, family child care homes, and in-home providers? (§98.30(e)(2))

☑ Certificate form provides information about choice of providers
☐ Certificate is not linked to a specific provider so parents can choose provider of choice
☑ Consumer education materials (flyers, forms, brochures)
☑ Referral to child care resource and referral agencies
☑ Verbal communication at the time of application
☐ Public Services Announcement
☑ Agency
Website: www.childcarefinder.IN.gov

☑ Community outreach meetings, workshops, other in person activities
☑ Multiple points of communication throughout the eligibility and renew process
☐ Other.
Describe:

c) What information is included on the child care certificate? **Attach a copy of the child care certificate as Attachment 2.6.1.** (658E(c)(2)(A)(iii))

☑ Authorized provider(s)
☑ Authorized payment rate(s)
☑ Authorized hours
☑ Co-payment amount
☑ Authorization period
☑ Other.
Describe:

overage-the difference between provider rate, co-pay and authorization and providers level in Paths to QUALTIY

d) What is the estimated proportion of services that will be available for child care services through certificates?

97.71%

2.6.2. Child Care Services Available through Grants or Contracts

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b)). **Note:** Do not check "yes" if every provider is simply required to sign an agreement in order to be paid in the certificate program.

☑ Yes.

If yes, **describe** the type(s) of child care services available through grants or contracts, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts:

This group of accredited, Level 4 Paths to QUALITY child care centers from low income areas across the state retain contracts to deliver CCDF services. These contracts ensure that accredited care will be available in communities where such care might not survive without contract support. These sites are required to maintain national accreditation and level 4 in Paths to QUALITY. Families have the option of a voucher or referral to a grantee funded through a contract.

☐ No.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following? Check the strategies, if any, that your State/Territory chooses to implement.

☑ Increase the supply of specific types of care
☐ Programs to serve children with special needs
☐ Wrap-around or integrated child care in Head Start, Early Head Start, pre-k, summer or other programs
☐ Programs to serve infant/toddler
☐ School-age programs
☑ Center-based providers
☐ Family child care providers
☐ Group-home providers
☐ Programs that serve specific geographic areas
☐ Urban
☐ Rural
☑ Other.
Describe:

Programs that are nationally accredited and serve low income neighborhoods.

☑ Support programs in providing higher quality services
☐ Support programs in providing comprehensive services
☑ Serve underserved families.
Specify:

These contracts ensure that accredited licensed care will be available in communities where such care might not survive without contract support.

☐ Other.
Describe:

c) Are child care services provided through grants or contracts offered throughout the State/Territory? (658E(a), §98.16(g)(3))

☑ Yes.
☐ No,
and **identify** the localities (political subdivisions) and services that are not offered:

d) How are payment rates for child care services provided through grants/contracts determined?

These providers receive the current reimbursement rate for licensed, accredited providers.

e) What is the estimated proportion of direct services that will be available for child care services through grants/contracts?

2.2%

2.6.3. How will the Lead Agency inform parents and providers of policies and procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds? (658E(c)(2)(B), §98.31)) Check the strategies that will be implemented by your State/Territory.

☐ Signed declaration
☐ Parent Application
☐ Parent Orientation
☑ Provider Agreement
☑ Provider Orientation
☑ Other.
Describe:

Agency website www.childcarefinder.IN.gov

2.6.4. The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. (§§98.16(g)(2), 98.30(e)(1)(iv)) Will the Lead Agency limit the use of in-home care in any way?

☐ No

☑ Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all limits the Lead Agency will establish.

☑ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act

☑ Restricted based on provider meeting a minimum age requirement

☑ Restricted based on hours of care (certain number of hours, non-traditional work hours)

☐ Restricted to care by relatives

☐ Restricted to care for children with special needs or medical condition

☑ Restricted to in-home providers that meet some basic health and safety requirements

☐ Other.
Describe:

2.6.5. Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. (658E(c)(2)(C), §98.32)

Indiana has strict laws about client confidentiality as it relates to Child Protective Services (CPS) findings. If a parent complaint results in a CPS substantiation of abuse or neglect, this confidentially will be strictly maintained. Paper files housed within the Lead Agency will maintain the record of the substantiation. The Lead Agency works closely with the Department of Child Services on investigations of these types of allegations and if these allegations result in a substantiated licensing or certification violation, the substantiated complaint will be posted on www.childcarefinder.in.govand is available for public viewing. These substantiated licensing/registration complaints are posted for three years. .   The Lead Agency conducts checks of the Indiana Child Protective Index and child care providers with substantiations are prohibited from working or volunteering in a child care center and/or ministry. They are also prohibited from becoming a licensed home provider and from receiving payment from CCDF.

The Lead Agency investigates all complaints received about licensed/registered/CCDF certified providers as well as all complaints of providers operating illegally. All substantiated complaints on regulated providers are posted on www.childcarefinder.in.govand are posted for three years for public review. Request for copies of the written files may also be made to the Lead Agency.

If a complaint substantiation results in a probationary license for a licensed center or licensed home notice of this probation will be posted in the local paper and families enrolled in the program will receive a letter informing them about the probation. Additionally providers are required to post their probationary license in public view.

If a complaint substantiation results in revocation of license or termination of registration status, the

action will be documented on our
www.childcarefinder.in.gov website as well as be available in the hard
copy file for public review.

The www.childcarefinder.in.gov website also lists inspection reports of licensed/registered providers and non compliance cited during the inspections. These inspection reports are also available on request in hard copy form.

2.7. Payment Rates for Child Care Services

The statute at 658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to establish adequate payment rates for child care services that ensure eligible children equal access to comparable care.

2.7.1. Provide a copy of your payment rates as Attachment 2.7.1.

The attached payment rates were or will be effective as of: 10/1/2011

2.7.2. Are the attached payment rates provided in Attachment 2.7.1 used in <u>all</u> parts of the State/Territory?

☑ Yes.
☐ No. If no, attach other payment rates and their effective date(s) as **Attachment 2.7.2a, 2.7.2b**, etc.

2.7.3. Which strategies, if any, will the Lead Agency use to ensure the timeliness of payments?

☑ Policy on length of time for making payments.
Describe length of time: Providers are paid bi-weekly

☑ Track and monitor the payment process
☐ Other.
Describe:

☐ None

2.7.4. Market Rate Survey

Lead Agencies must complete a local Market Rate Survey (MRS) no earlier than two years prior to the effective date of the Plan (no earlier than October 1, 2009). The MRS must be completed prior to the submission of the CCDF Plan (see Program Instruction CCDF-ACF-PI-2009-02 http://www.acf.hhs.gov/programs/ccb/law/guidance/current/pi2009-02/pi2009-02.htm for more information on the MRS deadline).

a) Provide the month and year when the local Market Rate Survey(s) was completed (§98.43(b)(2)): 03/2011

b) Attach a copy of the **MRS instrument** and a **summary of the results** of the survey **as Attachment 2.7.4.** For Lead Agencies that use an administrative provider database, provide a copy of the intake form as the instrument. The summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

2.7.5. Will the Lead Agency use the local Market Rate Survey identified in 2.7.4a (i.e., the most recent MRS) to set its payment rates?

☐ Yes
☑ No.
If no, list the MRS year that the payment rate ceiling is based upon: 2007

2.7.6. At what percentile of the most recent local MRS are or will payment rates be set? Provide the percentile for your payment rate ceiling in relation to the most recent survey and **describe:**

Note: Identify the percentile where payment rates fall according to the most recent local MRS (identified in 2.7.4a) regardless of whether or not you use the most recent survey to set rates. If the percentile(s) varies across categories of care (e.g., different for centers and family child care homes), regions or ages of children, provide the range of the highest and lowest percentile in relation to the most recent survey.

Licensed Centers: 53.5
Licensed Homes: 63.7
Total Average 58.6

2.7.7. Will the Lead Agency provide any type of tiered reimbursement or differential rates on top of its base reimbursement rates for providing care for children receiving CCDF subsidies? Check which types of tiered reimbursement, if any, the Lead Agency has chosen to implement.

☐ Differential rate for nontraditional hours.
Describe:

☑ Differential rate for children with special needs as defined by the State/Territory.
Describe:

Reimbursement to child care providers caring for children with special needs may exceed the market rate by 10%. This determination is made by the Automated Intake System (AIS) based upon the provider's charges as recorded by the Intake Agent.

☐ Differential rate for infants and toddlers.
Describe:

☐ Differential rate for school-age programs.
Describe:

☑ Differential rate for higher quality as defined by the State/Territory.
Describe:

Up to 10% may be added to the base market rate for accredited facilities and up to 5% for Certified Ministries.

☐ Other differential rate.
Describe:

☐ None.

2.7.8. Will the Lead Agency allow providers to charge parents any additional fees?
Check the policies, if any, the Lead Agency has chosen to establish regarding additional fees.

☑ Providers are allowed to charge the difference between the maximum reimbursement rate and their private pay rate

☑ Providers are allowed to charge registration fees

☑ Providers are allowed to charge for transportation fees
☑ Providers are allowed to charge for meals.
☑ Providers are allowed to charge additional incidental fees such as field trips or supplies
☐ Policies vary across region, counties and or geographic areas.
Describe:

☐ No, providers may not charge parents any additional fees
☐ Other.
Describe:

☐ None

2.7.9. Describe how payment rates are adequate to ensure equal access to the full range of providers based on the Market Rate Survey.

CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. To demonstrate equal access, the Lead Agency shall provide at a minimum a summary of facts describing: (§98.43(a))

a) How a choice of the full range of providers, e.g., child care centers, family child care homes, group child care homes and in-home care, is made available (§98.43(a)(1)):

Parents may choose from a wide variety of CCDF eligible providers including licensed centers, licensed homes, registered faith based care, in home care and relative care. The list of CCDF eligible providers is sent to the CCRR on a monthly basis. By updating the CCRR on a monthly basis this gives the CCRR a greater ability in helping CCDF clients access the full range of CCDF providers.
Another way the Lead Agency ensures equal access to the full range of providers is by reimbursing 10% over the reimbursement rate for accredited licensed centers and homes and 5% over the reimbursement rate for registered ministries that meet Voluntary Certification Program standards (VCP).

b) How payment rates are adequate based on the most recent local MRS (§98.43(a)(2)):

Payment rates are based on local market surveys of licensed care. Tiered rates will be maintained with separate payment rates for licensed, accredited and legally-license exempt providers. Rates are established by county on a weekly, daily and hourly basis for categories of care which include infant, toddler, ages three through five, kindergarten and school age.

Providers are paid bi-weekly and can bill for up to six holidays per calendar year. Fulltime care is defined as 25 hours or more per week for non-school age children or fifteen hours per week for school-age children

during the school year. Each fulltime child is allowed twenty
personal days per enrollment year which can be used on days when the child care facility is open and
the child does not attend.

Reimbursement for in-home care is calculated per family on an hourly
rate consistent with federal minimum wage. One rate is established for all
children. No more than 40 hours may be paid in a week (Sunday through
Saturday). Market rates do not apply to this category of care.

c) How family co-payments based on a sliding fee scale are affordable (§98.43(a)(3)):

Families are eligible for entry onto the CCDF program at 127% FPL and
may remain on the program until they reach 171% FPL. A family
entering the program for the first time at the highest income level (127%
FPL) will have a co-payment equal to 7% of their monthly income.
Family co-payments increase as their income relative to poverty increases
and for each year they are on the program. A family at the highest income
to remain on the program (up to 171% FPL) will have a co-payment
between 10% and 15% of their monthly income depending on how long
they have been receiving CCDF services.

Families above 100% of poverty have co-payments based on income and
family size. While families may remain at the same poverty level each
year, their family contribution will increase by 1% per year of
participation not to exceed 15%. (This policy was adopted to support self-sufficiency goals of the CCDF
program without imposing severe co-payments or restrictive time limits for participation.)

Families below 100% of FPL do not have a co-pay.

d) Any additional facts the Lead Agency considered to determine that its payment rates ensure equal access:

The Lead Agency monitors the percentage of licensed homes, licensed centers, and registered faith based programs that accept CCDF vouchers to ensure that there are sufficient types of each provider available for families to choose from.

2.7.10 Goals for the next Biennium -

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). What are the Lead Agency's goals for the administration of the CCDF subsidy program in the coming Biennium? For example, what progress does the State/Territory expect to make on continuing improved services to parents and providers, continuity of care for children, improving outreach to parents and providers, building or expanding information

technology systems, or revising rate setting policies or practices):

The Lead Agency's goals for the next Biennium include:

- *Increased access to high quality care for CCDF families by supporting provider attainment of higher levels of quality on the Paths to QUALITY program;*
- *Expanded our outreach efforts to families about Paths to QUALITY and the importance of high quality child care; and*
  Review our CCDF policy and procedures to insure both program integrity and family access to the program.

3.1. Activities to Ensure the Health and Safety of Children in Child Care (Component #1)

This section is intended to collect information on how Lead Agencies meet the statutory and regulatory provisions related to licensing and health and safety requirements. The CCDBG statute and the CCDF regulations address health and safety primarily in two ways.

First, Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced. Second, Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF.

The relationship between licensing requirements and health and safety requirements varies by State/Territory depending on how comprehensive the licensing system is. In some States and Territories, licensing may apply to the majority of CCDF-eligible providers and the licensing standards cover the three CCDF health and safety requirements so the State/Territory has few, if any, providers for whom they need to establish additional CCDF health and safety requirements. In other cases, States and Territories have elected to exempt large numbers of providers from licensing which means that those exempted providers who care for children receiving assistance from CCDF will have to meet to the CCDF health and safety requirements through an alternative process outside of licensing. The State/Territory may also elect to impose more stringent standards and licensing or regulatory requirements on child care providers of services for which assistance is provided under the CCDF than the standards or requirements imposed on other child care providers. (§98.40(b)(1)) Section 3.1 asks the State/Territory to identify and describe the components of both the licensing and CCDF health and safety requirements, indicate which providers are subject to the requirements, and describe compliance and enforcement activities. (658E(c)(2)(F), §98.41)

3.1.1. Compliance with Applicable State/Territory and Local Regulatory Requirements on Licensing

Lead Agencies shall certify that they have in effect licensing requirements applicable to

child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced.

  Definition: Licensing requirements are defined as regulatory requirements, including registration or certification requirements established under State, local, or tribal law, necessary for a provider to legally operate and provide child care services in a State or locality (§98.2). This does not include registration or certification requirements solely for child care providers to be eligible to participate in the CCDF program. Those requirements will be addressed in 3.1.2.

a) Is the Lead Agency responsible for child care licensing? (§98.11(a))
☑ Yes.
☐ No.
Please identify the State or local (if applicable) entity/agency responsible for licensing:

b) **Provide a brief overview** of the relationship between the licensing requirements and CCDF health and safety requirements in your State/Territory. At a minimum, describe whether the State/Territory's licensing requirements serve as the CCDF health and safety requirements.
Providers that are licensed are considered to have met the CCDF health and safety requirements by law.

c) CCDF identifies and defines four categories of care: child care centers, family child care homes, group child care homes and in-home child care providers (§98.2). The CCDF definition for each category is listed below. Within each CCDF category of care, please identify which types of providers are exempt from licensing in your State/Territory in the chart below.

CCDF Category of Care	CCDF Definition (§98.2)	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?

| Center-Based Child Care | Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work. | Describe which types of center-based settings are exempt from licensing in your State/Territory.

For example, some jurisdictions exempt school-based centers, centers operated by religious organizations, summer camps, or Head Start programs
IC 12-17.2-2-8
Licensure exemptions
Sec. 8. The division shall exempt from licensure the following programs
(1) A program for children enrolled in grades kindergarten through 12
that is operated by the department of education or a public or private
school.
(2) A program for children who become at least three (3) years of age as of December 1 of a particular school year (as defined in IC 20-18-2-17) that is operated by the department of education or a public or private school
(3) A nonresidential program for a child that provides child care for less
than four (4) hours a day.
(4) A recreation program for children that operates for not more than ninety (90) days in a calendar year.
(5) A program whose primary purpose is to provide social, recreational, or religious activities for school age children, such as scouting, boys club, girls club, sports, or the arts
(6) A program operated to serve migrant children that:
(A) provides services for children from migrant worker families; and
(B) is operated during a single period of less than one hundred twenty (120) consecutive days during a calendar year.
(7) A child care ministry |

		registered under IC 12-17.2-6.
		(8) A child care home if the provider:
		(A) does not receive regular compensation;
		(B) cares only for children who are related to the provider;
		(C) cares for less than six (6) children, not including children for whom the provider is a parent, stepparent, guardian, custodian, or other relative; or
		(D) operates to serve migrant children.
		(9) A child care program operated by a public or private secondary school that:
		(A) provides day care on the school premises for children of a student or an employee of the school;
		(B) complies with health, safety, and sanitation standards as determined by the division under section 4 of this chapter for child care centers or in accordance with a variance or waiver of a rule governing child care centers approved by the division under section 10 of this chapter; and
		(C) substantially complies with the fire and life safety rules as determined by the state fire marshal under rules adopted by the division under section 4 of this chapter for child care centers or in accordance with a variance or waiver of a rule governing child care centers approved by the division under section 10 of this chapter.
		(10) A school age child care program (commonly referred to as a latch key program) established under IC 20-26-5-2 that is operated by:
		(A) the department of education;
		(B) a public or private school; or
		(C) a public or private organization under a written contract with:
		(i) the department of education; or
		(ii) a public or private school.
		As added by P.L.1-1993,

Group Home Child Care N/A. Check if your State/Territory does not have group home child care. ☑	Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.	Describe which types of group homes are exempt from licensing:

| Family Child Care | Family child care provider is defined as one individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work. **Reminder -** Do not check if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements. | Describe which types of family child care home providers are exempt from licensing: *Licensure exemptions* *Sec. 8. The division shall exempt from licensure the following programs* *(1) A program for children enrolled in grades kindergarten through 12* *that is operated by the department of education or a public or private school.* *(2) A program for children who become at least three (3) years of age as of December 1 of a particular school year (as defined in IC 20-18-2-17) that is operated by the department of education or a public or private School (3) A nonresidential program for a child that provides child care for less than four (4) hours a day.* *(4) A recreation program for children that operates for not more than ninety (90) days in a calendar year.* *(5) A program whose primary purpose is to provide social, recreational, or religious activities for school age children, such as scouting, boys club, girls club, sports, or the arts (6) A program operated to serve migrant children that:* *(A) provides services for children from migrant worker families; and* *(B) is operated during a single period of less than one hundred twenty (120) consecutive days during a calendar year.* *(6) A child care ministry registered under IC 12-17.2-6.* *(7) A child care home if the provider:* *(A) does not receive regular compensation;* *(B) cares only for children who are related to the provider;* *(C) cares for less than six (6) children, not including children for* |

		whom the provider is a parent, stepparent, guardian, custodian, or other relative; or
		(D) operates to serve migrant children.
		(8) A child care program operated by a public or private secondary school
		that:
		(A) provides day care on the school premises for children of a student or an employee of the school;
		(B) complies with health, safety, and sanitation standards as determined by the division under section 4 of this chapter for child care centers or in accordance with a variance or waiver of a rule governing child care centers approved by the division under section 10 of this chapter; and
		(C) substantially complies with the fire and life safety rules as determined by the state fire marshal under rules adopted by the division under section 4 of this chapter for child care centers or in accordance with a variance or waiver of a rule governing child care centers approved by the division under section 10 of this chapter.
		(9) A school age child care program (commonly referred to as a latch key program) established under IC 20-26-5-2 that is operated by:
		(A) the department of education;
		(B) a public or private school; or
		(C) a public or private organization under a written contract with:
		(i) the department of education; or
		(ii) a public or private school.
		As added by P.L.1-1993, SEC.141. Amended by P.L.61-1993, SEC.8;
		P.L.136-1993, SEC.6; P.L.2-1995, SEC.50; P.L.50-2001, SEC.1; P.L.1-2005, SEC.136.

| In-Home Care | In-home child care provider is defined as an individual who provides child care services in the child's own home. **Reminder** - Do not respond if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements. | Describe which types of in-home child care providers are exempt from licensing: *Providers who care for children in the child's home are exempt from licensing.* |

 Note: In lieu of submitting or attaching licensing regulations to certify the requirements of §98.40(a)(1), Lead Agencies may provide their licensing regulations to the National Resource Center for Health and Safety in Child Care and Early Education. Please check the NRCKid's website at http://nrckids.org/ to verify the accuracy of your licensing regulations and provide any updates to the National Resource Center. **Check this box to indicate that the licensing requirements were submitted and verified at NRCKid's:** ☑

d) **Indicate** whether your State/Territory licensing requirements include any of the following four indicators for each category of care*.

*Source: National Resource Center for Health and Safety in Child Care and Early Education. (2003) Stepping Stones to Using Caring for Our Children: National Health and Safety Performance Standards, 2nd Ed. Health Resources and Services Administration, Maternal and Child Health Bureau. Available online: http://nrckids.org/stepping

Indicator	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care

Do the licensing requirements include **child:staff ratios and group sizes?** If yes, specify age group, where appropriate:	☑ Child:staff ratio requirement:	☐ Child:staff ratio requirement:	☑ Child:staff ratio requirement:	☑ Child:staff ratio requirement:
	4:1 infants; 5:1 toddlers; 5:1 two-year-olds; 7:1 30-36 months; 10:1 three year olds; 12:1 four year olds;15:1 five year olds and older	☐ Group size requirement:	Infant/Toddler Mixed (Birth24 months) 6:1*; *Two (2) of the six (6) children must be at least sixteen (16) months of age and walking. Otherwise the ratio is 4:1;.Mixed Age Groups (Birth6 years) 10:1*; *No more than three (3) of the ten (10) children may be under sixteen (16) months of age and must be walking; 3 years and older(310 years) 12:1	☐ Group size requirement:
	☐ Group size requirement:	☐ No requirements.		☐ No requirements.
	infants - 8; toddlers -10; two-year-olds-10; 30-36 months - 14;three year olds - 20; four year olds - 24; five year olds and older - 30			
	☐ No requirements.		☐ Group size requirement:	
			☐ No requirements.	

Do the licensing requirements identify specific experience and educational **credentials for child care directors?**	☐ High school/GED	☐ High school/GED	☑ High school/GED	☐ High school/GED
	☐ Child Development Associate (CDA)	☐ Child Development Associate (CDA)	☑ Child Development Associate (CDA)	☐ Child Development Associate (CDA)
	☐ State/ Territory Credential	☐ State/ Territory Credential	☐ State/ Territory Credential	☐ State/ Territory Credential
	☑ Associate's degree	☐ Associate's degree	☐ Associate's degree	☐ Associate's degree
	☑ Bachelor's degree	☐ Bachelor's degree	☐ Bachelor's degree	☐ Bachelor's degree
	☐ No credential required for licensing	☐ No credential required for licensing	☐ No credential required for licensing	☐ No credential required for licensing
	☐ Other:	☐ Other:	☐ Other:	☐ Other:

Do the licensing requirements identify specific experience and educational **credentials for child care teachers?**	☑ High school/GED	☐ High school/GED	☐ High school/GED	☐ High school/GED
	☑ Child Development Associate (CDA)	☐ Child Development Associate (CDA)	☐ Child Development Associate (CDA)	☐ Child Development Associate (CDA)
	☐ State/ Territory Credential	☐ State/ Territory Credential	☐ State/ Territory Credential	☐ State/ Territory Credential
	☐ Associate's degree	☐ Associate's degree	☐ Associate's degree	☐ Associate's degree
	☐ Bachelor's degree	☐ Bachelor's degree	☐ Bachelor's degree	☐ Bachelor's degree
	☐ No credential required for licensing	☐ No credential required for licensing	☑ No credential required for licensing	☐ No credential required for licensing
	☐ Other:	☐ Other:	☐ Other:	☐ Other:
Do the licensing requirements specify that directors and caregivers must attain a specific number of **training hours per year?**	☐ At least 30 training hours required in first year	☐ At least 30 training hours required in first year	☐ At least 30 training hours required in first year	☐ At least 30 training hours required in first year
	☐ At least 24 training hours per year after first year	☐ At least 24 training hours per year after first year	☐ At least 24 training hours per year after first year	☐ At least 24 training hours per year after first year
	☐ No training requirement	☐ No training requirement	☑ No training requirement	☐ No training requirement
	☑ Other: 12 hours of in service training per year.	☐ Other:	☐ Other:	☐ Other:

e) Do you expect the licensing requirements for child care providers to change in FY2012-2013?

Describe:

☑ No.

3.1.2. Compliance with Applicable State/Territory and Local Regulatory Requirements on Health and Safety

Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Such requirements shall include the prevention and control of infectious diseases (including immunization), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. These health and safety requirements apply to all providers caring for children receiving CCDF services and which also may be covered by the licensing requirements. (658E(c)(2)(F), §98.41)

a) **Describe** the Lead Agency's health and safety requirements for prevention and control of infectious disease in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(i), §98.41(a)(1))

For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.				
The Lead Agency requires:	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
☑ Physical exam or health statement for providers	☑	☑	☐	☐
☑ Physical exam or health statement for children	☑	☑	☐	☐

☑ Tuberculosis check for providers	☑	☑	☐	☑
☐ Tuberculosis check for children	☐	☐	☐	☐
☐ Provider immunizations	☐	☐	☐	☐
☑ Child immunizations	☑	☑	☐	☑
☑ Hand-washing policy for providers and children	☑	☑	☐	☐
☑ Diapering policy and procedures	☑	☑	☐	☐
☑ Providers to submit a self-certification or complete health and safety checklist	☑	☐	☐	☐
☐ Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	☐	☐	☐	☐
☐ Other. Describe:	☐	☐	☐	☐

b) **Describe** the Lead Agency's health and safety requirements for building and physical premises safety, including policies and practices to protect from environmental hazards, in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(ii), §98.41(a)(2))

The Lead Agency requires:	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
☑ Fire inspection	☑	☑	☐	☐
☑ Building inspection	☑	☑	☐	☐
☑ Health inspection	☑	☑	☐	☐
☑ Inaccessibility of toxic substances policy	☑	☑	☐	☑
☑ Safe sleep policy	☑	☑	☐	☑
☑ Tobacco exposure reduction	☑	☑	☐	☑
☑ Transportation policy	☑	☑	☐	☐
☐ Providers to submit a self-certification or complete health and safety checklist	☐	☐	☐	☑
☑ Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	☑	☐	☐	☐

☐	☐	☐	☐	☐
☐ Other. Describe:				

c) **Describe** the Lead Agency's health and safety requirements for health and safety training in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(iii), §98.41(a)(3))

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
Child Care Centers	CPR (Child Care Centers)	*At least one person onsite at all times and all infant and toddler staff*	*At least one person onsite at all times and all infant and toddler staff*
	First Aid (Child Care Centers)	*All infant and toddler staff*	*All staff 90 days after starting employment*
	Training on infectious diseases (Child Care Centers)	*All staff must be trained on Universal Precautions*	*Staff have to have Universal Precautions annually*
	SIDS prevention (i.e., safe sleep) (Child Care Centers)	*not required*	*not required*
	Medication administration (Child Care Centers)	*All Staff must be trained on Medication Policy*	*not required*
	Mandatory reporting of suspected abuse or neglect (Child Care Centers)	*not required*	*Within the first 2 weeks of employment*
	Child development (Child Care Centers)	*not required*	*Within the first 2 weeks of employment*
	Supervision of children (Child Care Centers)	*not required*	*not required*
	Behavior management (Child Care Centers)	*All staff must be trained on Child Discipline Policy*	*not required*
	Nutrition (Child Care Centers)	*Any For Profit provider has to have Serv Safe Training*	*Any For Profit provider has to have Serv Safe Training*
	Breastfeeding (Child Care Centers)	*not required*	*not required*
	Physical activity (Child Care Centers)	*not required*	*not required*

	Working with children with special needs or disabilities (Child Care Centers)	not required	*Within 6 months the director must have Inclusion Training* *All staff have to be trained on special needs inclusion policies within the first 2 weeks*
	Emergency preparedness and response (Child Care Centers)	*All staff must be trained on Emergency Evacuation Procedures*	not required
	Other. (Child Care Centers) Describe: nothing additional	nothing additional	nothing additional
Group Home Child Care	CPR (Group Home Child Care)	not applicable	not applicable
	First Aid (Group Home Child Care)	not applicable	not applicable
	Training on infectious diseases (Group Home Child Care)	not applicable	not applicable
	SIDS prevention (i.e., safe sleep) (Group Home Child Care)	not applicable	not applicable
	Medication administration (Group Home Child Care)	not applicable	not applicable
	Mandatory reporting of suspected abuse or neglect (Group Home Child Care)	not applicable	not applicable
	Child development (Group Home Child Care)	not applicable	not applicable
	Supervision of children (Group Home Child Care)	not applicable	not applicable
	Behavior management (Group Home Child Care)	not applicable	not applicable
	Nutrition (Group Home Child Care)	not applicable	not applicable
	Breastfeeding (Group Home Child Care)	not applicable	not applicable
	Physical activity (Group Home Child Care)	not applicable	not applicable

	Working with children with special needs or disabilities (Group Home Child Care)	not applicable	not applicable
	Emergency preparedness and response (Group Home Child Care)	not applicable	not applicable
	Other. (Group Home Child Care) Describe: not applicable	not applicable	not applicable
Family Child Care Providers	CPR (Family Child Care Providers)	*At least one person onsite at all times*	*At least one person onsite at all times*
	First Aid (Family Child Care Providers)	not required	*90 days after starting employment*
	Training on infectious diseases (Family Child Care Providers)	not required	*Universal Precautions within 30 days starting employment. Staff have to have this training yearly.*
	SIDS prevention (i.e., safe sleep) (Family Child Care Providers)	*Required for the licensee only*	not required
	Medication administration (Family Child Care Providers)	not required	not required
	Mandatory reporting of suspected abuse or neglect (Family Child Care Providers)	not required	*Within 30 days of starting employment*
	Child development (Family Child Care Providers)	not required	not required
	Supervision of children (Family Child Care Providers)	not required	not required
	Behavior management (Family Child Care Providers)	not required	not required
	Nutrition (Family Child Care Providers)	not required	not required
	Breastfeeding (Family Child Care Providers)	not required	not required
	Physical activity (Family Child Care Providers)	not required	not required

	Working with children with special needs or disabilities (Family Child Care Providers)	not required	not required
	Emergency preparedness and response (Family Child Care Providers)	not required	not required
	Other. (Family Child Care Providers) Describe: 1. *Fire prevention and Safety procedures* 2. *Child Care Home Inspection Checklist* 3. *Confidential Treatment of Personal information about children in care*	not required	*1. Within one week of starting employment* *2. Within 30 days of starting employment* *3. Within 30 days of starting employment*
In-Home Child Care Providers	CPR (In-Home Child Care Providers)	*At least one person on site at all times*	*At least one person on site at all times*
	First Aid (In-Home Child Care Providers)	*At least one person on site at all times*	*At least one person on site at all times*
	Training on infectious diseases (In-Home Child Care Providers)	not required	not required
	SIDS prevention (i.e., safe sleep) (In-Home Child Care Providers)	*Required for the applicant only*	bot required
	Medication administration (In-Home Child Care Providers)	not required	not required
	Mandatory reporting of suspected abuse or neglect (In-Home Child Care Providers)	not required	not required
	Child development (In-Home Child Care Providers)	not required	not required
	Supervision of children (In-Home Child Care Providers)	not required	not required
	Behavior management (In-Home Child Care Providers)	not required	not required

	Nutrition (In-Home Child Care Providers)	not required	not required
	Breastfeeding (In-Home Child Care Providers)	not required	not required
	Physical activity (In-Home Child Care Providers)	not required	not required
	Working with children with special needs or disabilities (In-Home Child Care Providers)	not required	not required
	Emergency preparedness and response (In-Home Child Care Providers)	not required	not required
	Other. (In-Home Child Care Providers)	nothing additional	nothing additional
	Describe: nothing additional		

d) CCDF allows Lead Agencies to exempt relative providers (grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles) from these health and safety requirements. What are the Lead Agency's requirements for relative providers? (§98.41(A)(ii))(A))

☑ All relative providers are subject to the same health and safety requirements as described in 3.1.2a-c, as appropriate; there are no exceptions for relatives.
☐ Relative providers are NOT required to meet any health and safety requirements as described in 3.1.2a-c, as appropriate.
☐ Relative providers are subject to certain requirements.
Describe the different requirements:

e) Provide a web address for the State/Territory's health and safety requirements, if available:
http://www.in.gov/fssa/carefinder/3903.htm

3.1.3 Enforcement of Licensing Requirements

Each Lead Agency is required to provide a detailed description of the State/Territory's licensing requirements and how its licensing requirements are effectively enforced. (658E(c)(2)(E), §98.40(a)(2)) The Lead Agency is also required to certify that that

procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with the applicable health and safety requirements. (658E(c)(2)(G), §98.41(d))

Describe the State/Territory's policies for effective enforcement of the licensing requirements using questions 3.1.3a through 3.1.3e below. This description includes whether and how the State/Territory uses visits (announced and unannounced), background checks, and any other enforcement policies and practices for the licensing requirements.

a) Does your State/Territory include **announced** and/or **unannounced** visits in its policies as a way to effectively enforce the licensing requirements?

☑ Yes. If "Yes" please refer to the chart below and check all that apply.
☐ No.

CCDF Categories of Care	Frequency of Routine Announced Visits	Frequency of Routine Unannounced Visits
☑ Center-Based Child Care	☐ Once a Year	☑ Once a Year
	☐ More than Once a Year	☐ More than Once a Year
	☐ Once Every Two Years	☐ Once Every Two Years
	☐ Other.	☐ Other.
	Describe:	Describe:
☐ Group Home Child Care	☐ Once a Year	☐ Once a Year
	☐ More than Once a Year	☐ More than Once a Year
	☐ Once Every Two Years	☐ Once Every Two Years
	☐ Other.	☐ Other.
	Describe:	Describe:

☑ Family Child Care Home	☐ Once a Year	☐ Once a Year
	☐ More than Once a Year	☐ More than Once a Year
	☑ Once Every Two Years	☑ Once Every Two Years
	☐ Other.	☐ Other.
	Describe:	Describe:
☑ In-Home Child Care	☑ Once a Year	☐ Once a Year
	☐ More than Once a Year	☐ More than Once a Year
	☐ Once Every Two Years	☐ Once Every Two Years
	☐ Other.	☐ Other.
	Describe:	Describe:

b) Does your State/Territory have any of the following procedures in place for effective enforcement of the licensing requirements? If procedures differ based on the category of care, please indicate how in the "Describe" box.

☑ Yes. If "Yes" please refer to the chart below and check all that apply.

☐ No.

Licensing Procedures	Describe which procedures are used by the State/Territory for enforcement of the licensing requirements.

The State/Territory requires providers to attend or participate in training relating to opening a child care facility prior to issuing a license.	☑ Yes.
	Describe: *Orientation Training part 1 and 2.*
	☐ No.
	☐ Other.
	Describe:
Licensing staff has procedures in place to address violations found in an inspection.	☑ Providers are required to submit plans to correct violations cited during inspections.
	☑ Licensing staff approve the plans of correction submitted by providers.
	☑ Licensing staff verify correction of violation.
	☑ Licensing staff provide technical assistance regarding how to comply with a regulation.
	☐ No procedures in place.
	☐ Other.
	Describe:

Licensing staff has procedures in place to issue a negative sanction to a noncompliant facility.	☑ Provisional or probationary license
	☑ License revocation or non-renewal
	☑ Injunctions through court
	☑ Emergency or immediate closure not through court action
	☐ Fines for regulatory violations
	☐ No procedures in place.
	☐ Other.
	Describe:
The State/Territory has procedures in place to respond to illegally operating child care facilities.	☑ Cease and desist action
	☑ Injunction
	☐ Emergency or immediate closure not through court action
	☑ Fines
	☐ No procedures in place.
	☐ Other.
	Describe:

The State/Territory has procedures in place for providers to appeal licensing enforcement actions.	☑ Yes.
	Describe: *Provider must submit a written appeal within 30 days of receipt.*
	☐ No.
	☐ Other.
	Describe:

c) Describe what types of licensing violations, if any, would make a provider ineligible to participate in CCDF:

The following are violations for licensed homes that would cause the provider to be ineligible to receive CCDF payments:

(1) A determination by the department of child services of child abuse or neglect (as defined in IC 31-9-2-14) by:
(A) the licensee;
(B) a member of the licensee's household;
(C) an employee of the licensee who has direct contact, on a regular and continuous basis, with children who are under the direct supervision of the licensee; or
(D) a volunteer of the licensee who has direct contact, on a regular and continuous basis, with children who are under the direct supervision of the licensee.
(2) A criminal conviction of the licensee, an employee of the licensee who has direct contact, on a regular and continuous basis, with children who are under the direct supervision of the licensee, a volunteer of the licensee who has direct contact, on a regular and continuous basis, with children who are under the direct supervision of the licensee, or a member of the licensee's household, of any of the following:
(A) A felony.
(B) A misdemeanor related to the health or safety of a child.
(C) A misdemeanor for operating a child care center without a license under IC 12-17.2-4-35.
(D) A misdemeanor for operating a child care home without a license under section 35 of this chapter.
(3) A determination by the division that the licensee made false statements in the licensee's application for licensure.
(4) A determination by the division that the licensee made false statements in the records required by the division.
(5) A determination by the division that the licensee previously operated a:
(A) child care center without a license under IC 12-17.2-4; or
(B) child care home without a license under this chapter.
(b) Notwithstanding subsection (a)(2), if:
(1) a license is revoked due to a criminal conviction of:
(A) an employee or a volunteer of the licensee's; or
(B) a resident of the licensee's household; and
(2) the division determines that the:

(A) employee or volunteer has been dismissed by the licensee; or
(B) member of the licensee's household is no longer a member of the licensee's household; the criminal conviction of the former employee, former volunteer, or former member does not require revocation of a license.

The following are violations for licensed center that would cause the center to be ineligible to receive CCDF payments:

IC 12-17.2-4-3

.
   (c) The applicant must submit with the application a statement attesting that the applicant:
     (1) has not been convicted of:
       (A) a felony;
       (B) a misdemeanor relating to the health or safety of children;
       (C) a misdemeanor for operating a child care center without a license under section 35 of this chapter
       (D) a misdemeanor for operating a child care home without a license under IC 12-17.2-5-35; and
     (2) has not been charged with:
       (A) a felony;
       (B) a misdemeanor relating to the health or safety of children;
       (C) a misdemeanor for operating a child care center without a license under section 35 of this chapter
       (D) a misdemeanor for operating a child care home without a license under IC 12-17.2-5-35;
    during the pendency of the application.
   (d) An applicant must submit the necessary information, forms, or consents for the division to obtain a national criminal history background check on the applicant through the state police department under IC 10-13-3-39.
   (e) The applicant must do the following:
     (1) Conduct a criminal history check of the applicant's employees and volunteers.
     (2) Maintain records of each criminal history check.

470 IAC 3-4.7-8 Criminal history check; required actions
Authority: IC 12-13-5-3
Affected: IC 12-17.2-4
Sec. 8. (a) Sufficient grounds exist to revoke or deny licensure if an owner or director commits any crime that would require that they be listed in any state or national registry that is intended to protect children from violent and sex offenders.
(b) Sufficient grounds exist to deny employment or to dismiss any employee if the employee commits any crime that would require that they be listed in any state or national registry that is intended to protect children from violent and sex offenders.
(c) If a criminal history check of an owner, director, employee, or volunteer shows that any of the following offenses has occurred, sufficient grounds exist to revoke or deny licensure, deny employment, or dismiss an employee, as applicable:
(1) Adoption schemes.
(2) Adulterating drugs, controlled substances, or preparations.
(3) Aiding or abetting the filing of false claims.
(4) Allowing an establishment to be used for illegal purposes.
(5) Any crime that involves a violent act or a threat of a violent act.
(6) Armed robbery.
(7) Arson.
(8) Assault.
(9) Attempts to commit armed robbery, burglary, or robbery.
(10) Attempts to commit criminal sexual conduct.
(11) Attempts to commit homicide or murder.
(12) Attempts to commit kidnapping.

(13) Battery.
(14) Bribery.
(15) Burglary.
(16) Child abuse, neglect, or exploitation.
(17) Concealing stolen property.
(18) Criminal sexual conduct in any degree.
(20) Cruelty toward or torture of any person.
(21) Embezzlement.
(22) Extortion.
(23) Filing of false claims.
(24) Fraud.
(25) Homicide.
(26) Kidnapping.
(27) Larceny by conversion.
(28) Larceny by trick.
(29) Manslaughter.
(30) Mayhem.
(31) Murder.
(32) Negligent homicide.
(33) Obtaining property by false pretenses.
(34) Offenses involving narcotics, alcohol, or controlled substances that result in a felony conviction.
(35) Poisoning.
(36) Prostitution or related crimes.
(37) Receiving stolen property.
(38) Robbery.
(39) Unlawful manufacture or delivery of drugs or possession with intent to manufacture or deliver drugs.
(d) The center may request a waiver under subsection (c) based on the specific circumstances of the case, but a person shall not be employed by a center or a child care center approved for licensure unless the waiver is granted.
(e) The center shall notify the division immediately of any felony conviction that appears on a criminal history check or is otherwise known by the center.
(f) Any felony listed in subsection (c) is sufficient grounds to revoke or deny licensure and to dismiss any employee. Hiring an employee with felony convictions not listed in subsection (c) will require prior approval of the division.
(g) The division must approve any exceptions made under this section.

d) Does your State/Territory use **background checks** as a way to effectively enforce the licensing requirements?

☑ Yes.
If "Yes" please use refer to the chart below to identify who is required to have background checks, what types of checks, and with what frequency. Please **also provide a brief overview** of the State/Territory's process for conducting background checks for child care. For example, describe what types of violations would make providers ineligible for CCDF, funding for background checks, and the process for providers to appeal background check findings.

Background checks are required for all CCDF eligible providers, including checks of the CPI (Child Protection Index) and SOR (Sex Offender Registry). National Criminal History Checks are paid by the licensee in child care homes and the person who signs the application for child care centers.
BCC conducts the limited criminal history check on the applicant for child care centers and on the licensee, all staff, all household members over 18 years of age, and on volunteers for child care homes.; Licensed Centers pay for staff and volunteer limited criminal history checks. BCC does the sex offenders and CPI check on all child care center staff, the licensee, all staff, all household members over 18 years of age, and on volunteers for child care homes and registered faith based programs.
* CPI checks - are completed through BCC. Any criminal conviction or CPS substantiation that effects the health or safety of a child would be grounds for denial or revocation of a licensed child care center or licensed child care home license.   All sex offender validations would also be grounds for denial or revocation of a license.*
Process for providers to appeal:
An individual can contact the Indiana State Police if they wish to file a challenge to their criminal history results.
If licensing action is taken because of a finding, the following appeal procedures are the same for licensed child care centers and licensed child care homes.
Administrative hearings
*   (a) An administrative hearing concerning the decision of the division to impose a sanction under this chapter shall be provided upon a written request by the child care center. The request must be made within thirty (30) calendar days after receiving notice under section 18.7 or 19 of this chapter. The written request must be made separately from an informal meeting request made under section 19 of this chapter.*
*   (b) The administrative hearing shall be held within sixty (60) calendar days after receiving the written request.*

☐ No.

CCDF Categories of Care	Types of Background Check	Frequency

☑ **Center-Based Child Care** Who is subject to background checks for center-based care? For example, director, teaching staff, non-teaching staff, volunteers: director, teaching staff, non-teaching staff, volunteers	☑ Child Abuse Registry	☐ Initial Entrance into the System
		☑ Checks Conducted Annually
		☐ Other.
		Describe:
	☑ State/Territory Criminal Background	☑ Initial Entrance into the System
		☐ Checks Conducted Annually
		☐ Other.
		Describe:
	☑ FBI Criminal Background (e.g., fingerprint)	☐ Initial Entrance into the System
		☐ Checks Conducted Annually
		☑ Other.
		Describe: *every 2 years for the applicant*
	☑ Sex Offender Registry	☐ Initial Entrance into the System
		☑ Checks Conducted Annually
		☐ Other.
		Describe:

☐ **Group Child Care Homes** Who is subject to background checks for group homes? For example, provider, non-provider residents of the home:	☐ Child Abuse Registry	☐ Initial Entrance into the System
		☐ Checks Conducted Annually
		☐ Other. Describe:
	☐ State/Territory Criminal Background	☐ Initial Entrance into the System
		☐ Checks Conducted Annually
		☐ Other. Describe:
	☐ FBI Criminal Background (e.g., fingerprint)	☐ Initial Entrance into the System
		☐ Checks Conducted Annually
		☐ Other. Describe:
	☐ Sex Offender Registry	☐ Initial Entrance into the System
		☐ Checks Conducted Annually
		☐ Other. Describe:

Family Child Care Homes		
☑ **Family Child Care Homes** Who is subject to background checks for family child care homes? For example, provider, non-provider residents of the home: providers, applicant, non-provider residents of the home and volunteers	☑ Child Abuse Registry	☐ Initial Entrance into the System ☑ Checks Conducted Annually ☐ Other. Describe:
	☑ State/Territory Criminal Background	☐ Initial Entrance into the System ☑ Checks Conducted Annually ☐ Other. Describe:
	☑ FBI Criminal Background (e.g., fingerprint)	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☑ Other. Describe: *every 2 years for licensee only.*
	☑ Sex Offender Registry	☐ Initial Entrance into the System ☑ Checks Conducted Annually ☐ Other. Describe:

☑ **In-Home Child Care Providers**	☑ Child Abuse Registry	☐ Initial Entrance into the System
Who is subject to background checks for in-home child care? For example, provider, non-provider residents of the home:		☑ Checks Conducted Annually
		☐ Other.
		Describe:
providers, applicant, non-provider residents of the home and volunteers	☑ State/Territory Criminal Background	☐ Initial Entrance into the System
		☑ Checks Conducted Annually
		☐ Other.
		Describe:
	☐ FBI Criminal Background (e.g., fingerprint)	☐ Initial Entrance into the System
		☐ Checks Conducted Annually
		☐ Other.
		Describe:
	☑ Sex Offender Registry	☐ Initial Entrance into the System
		☑ Checks Conducted Annually
		☐ Other.
		Describe:

e) If not performing visits (announced or unannounced) or background checks, describe how the State/Territory will ensure that its licensing requirements are effectively enforced per the CCDF regulations? (658E(c)(2)(E), §98.40(a)(2)):

f) Does the State/Territory disseminate information to parents and the public, including the use of on-line tools or other "search tools," about child care program licensing status and compliance records?

☑ Yes.
Describe:

through our agency website www.childcarefinder.in.gov

☐ No.

3.1.4 Describe the State/Territory's policies for effective enforcement of the CCDF health and safety requirements. For providers who care for children receiving CCDF assistance and who are NOT subject to the enforcement procedures described above for licensed providers, please describe the health and safety enforcement measures in place. Include in this description whether and how the State/Territory uses on-site visits (announced and unannounced) and background checks and any other enforcement policies and practices for the health and safety requirements.

Legally license exempt providers that want to participate in the CCDF program must first demonstrate compliance with the following standards. Announced visits are conducted yearly to ensure compliance with the standards. Unannounced visits may be conducted if a complaint is received.

1. Criminal history check
2. TB test
3. Drug test
4. Child protection Index check
5. First Aid
6. CPR
7. Emergency Plans
8. Safe Environment
9. Working Telephone
10. Running Water
11. Exits
12. Fire Drills
13. Smoke Detectors
14. Fire Extinguishers
15. Immunization Records
16. Tobacco and Substance Policy
17. Supervision
18. Safe Sleep Training

3.1.5 Does the State/Territory encourage or require child care programs to conduct developmental screening and referral for children participating in child care programs? Lead Agencies are not required to conduct developmental screenings of children, but are encouraged to work with child care providers to promote screening in the areas of physical health (including vision and hearing), mental health, oral health, and developmental disabilities..

☑ Yes.
Describe

Developental screenings are not required but are encouraged through training and technical assistance.

Providers at Level 4 of Paths to QUALITY, Indiana's QRIS, are required to conduct developmental screenings.

a) If yes, are training, resources and supports offered to programs to assist them in ensuring that children receive appropriate developmental screenings?
☑ Yes.
Describe

Trainings and TA are available to assist providers with conducting developmental screenings and providing appropriate referrals. The Ages and Stages training is available through the CCR&R network. Inclusion specialists and/or Infant Toddler specialists are also available to provide onsite technical assistance. Programs are encouraged to refer children needing further evaluation to the state early intervention program, First Steps, or for Early Childhood Mental Health Consultation.

☐ No

☐ Other.

Describe

b) If yes, are resources and supports provided to programs to help them understand how families are referred to indicated services and how to work with the health, mental health, and developmental disabilities agencies to support children when follow-up to screening is needed?
☑ Yes.
Describe

 Inclusion Specialist are available statewide to assist providers with these types of issues.

☐ No

☐ Other.

Describe

☐ No

☐ Other.

Describe

3.1.6 Data & Performance Measures on Licensing and Health and Safety Compliance - What data elements, if any, does the State/Territory currently have access to related to licensing compliance? What, if any, performance measures does the Lead Agency use for ensuring health and safety? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on licensing and health and safety.** Indicate if the Lead Agency or another agency has access to data on:

☑ Number of licensed programs.
Describe (optional):

☑ Numbers of programs operating that are legally exempt from licensing.
Describe (optional):
Partially. Data is available only registered ministries and on the legally exempt providers that are eligible to serve CCDF children

☑ Number of programs whose licenses were suspended or revoked due to non-compliance.
Describe (optional):

☑ Number of injuries and fatalities in child care as defined by the State/Territory.
Describe (optional):

☑ Number of monitoring visits received by programs.
Describe (optional):

☑ Caseload of licensing staff.
Describe (optional):

☑ Number of programs revoked from CCDF due to non-compliance with health and safety requirements.
Describe (optional):

☑ Other.
Describe:
Frequency and type of non-compliances cited.
Number of compliants received, type of complaints recieved, number of validated complaints.
Number of probatons, reasons for probations.

☐ None.

b) **Performance measurement.** What, if any, performance measures does the State/Territory use in its licensing system to monitor compliance with CCDF health and safety requirements?

The CCDF health and safety requirements are part of the licensing regulation. The licensing unit conducts annual licensing inspection and investigates all licensing complaints. . As long as a provider remains licensed they are a CCDF eligible provider.   BCC tracks the types of non-complainces, compliants and probations which indicates the frequency and trends of health and safety non-compliances.

c) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to licensing and health and safety? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

Indiana will be evaluating if enrollment and participation in the QRIS decreases the incidents of serious licensing non-compliances.

3.1.7 Goals for the next Biennium - In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies are not required to establish a goal for each sub-section of 3.1. What are the Lead Agency's goals for the licensing and health and safety system in the coming biennium? What progress does the State/Territory expect to make on core areas (e.g. licensing standards, monitoring visits or other effective enforcement, improved technical assistance, or fewer serious non-compliances?)

The goals for the next Biennium include:
* *Increased technical assistance for providers with licensing violations;*
* *Fewer serious non-compliance as the participation in the Paths to QUALITY system at higher levels continues to increase;*
* *Increased number of unlicensed registered ministries participating in and meeting the standards of the Voluntary Certification Program; and*
* *Increased consumer awareness about Indiana Licensing Standards.*

3.2 Establishing Voluntary Early Learning Guidelines (Component #2)

For purposes of this section, voluntary early learning guidelines include the expectations for what children should know (content) and be able to do (skills). The term *early learning guidelines* (ELGs) refers to age-appropriate developmental learning guidelines for infants and toddlers and school-age children. These guidelines are voluntary in that States/Territory are not mandated to develop such guidelines or implement them in a specified manner.

3.2.1 Has the State/Territory developed voluntary early learning guidelines for children? Check any early learning guidelines the State/Territory has developed.

☑ Birth-to-three
☑ Three-to-five
☑ Five years and older
☐ None. **Skip to 3.2.6.**

If yes, insert web addresses, where possible:

Which State/Territory agency is the lead for the early learning guidelines?

Indiana Department of Education

3.2.2 Do the early learning guidelines cover a range of domains across physical, cognitive, and social and emotional development? Check all that apply for each age group as applicable in the chart below. Because States vary in their domain names and which domains to include, we have used the domains identified in the Head Start Child Development and Early Learning Framework for reference purposes.

Domains	Birth-to-Three ELGs	Three-to-Five ELGs	Five and Older ELGs
Physical development and health	☑	☑	☑
Social and emotional development	☑	☑	☑
Approaches to learning	☑	☑	☑
Logic and reasoning (e.g., problem-solving)	☑	☑	☑
Language development	☑	☑	☑
Literacy knowledge and skills	☑	☑	☑
Mathematics knowledge and skills	☑	☑	☑
Science knowledge and skills	☑	☑	☑
Creative arts expression (e.g., music, art, drama)	☑	☑	☑
Social studies knowledge and skills	☑	☑	☑
English language development (for dual language learners)	☑	☑	☑
List any domains not covered in the above:	☐	☐	☐
Other. Describe:	☐	☐	☐

3.2.3 To whom are the early learning guidelines disseminated and in what manner?
Check all audiences and methods that your State/Territory has chosen to use in the chart below.

	Information Dissemination	Voluntary Training	Mandatory Training
Parents in the child care subsidy system	☑	☑	☐
Parents using child care more broadly	☑	☑	☐
Practitioners in child care centers	☑	☑	☐
Providers in family child care homes	☑	☑	☐
Practitioners in Head Start	☑	☑	☐
Practitioners in Early Head Start	☑	☑	☐
Practitioners in public Pre-K program	☑	☑	☐
Practitioners in elementary schools	☑	☑	☐
Other. List: All providers level 2 and higher in Paths to QUALITY must receive training on the ELG. Additionally, at Level 3 child care programs must utilize a curriculum that aligns with the ELG.	☑	☐	☑

3.2.4 Are voluntary early learning guidelines incorporated into other parts of the child care system? Check which ways, if any, the State/Territory incorporates its early learning guidelines into other parts of the child care system.

☐ To define the content of training required to meet licensing requirements
☐ To define the content of training required for program quality improvement standards (e.g., QRIS standards)
☐ To define the content of training required for the career lattice or professional credential
☐ To require programs in licensing standards to develop curriculum/learning activities based on the voluntary ELGs
☑ To require programs in quality improvement standards to develop curriculum/learning activities based on the voluntary ELGs
☐ To develop State-/Territory -approved curricula

☑ Other.
List:

ELG are incorporated into trainings offered by the CCR&Rs.

☐ None.

3.2.5 Are voluntary early learning guidelines aligned with into other parts of the child care system? Check the standards, if any, with which the State/Territory aligns its early learning guidelines.

☑ Cross-walked to align with Head Start Outcomes Framework
☑ Cross-walked to align with K-12 content standards
☐ Cross-walked to align with State/Territory pre-k standards
☑ Cross-walked with accreditation standards
☑ Other.
List:

Cross walked with State QRIS standards

☐ None.

3.2.6 Describe how your State/Territory uses ongoing assessments and measures of school readiness assessment using the following series of questions. In this section, assessment is framed with two distinct purposes/tools - 1) ongoing assessment of children's progress within the classroom to improve and individualize instruction (this corresponds to 3.2.6a) and 2) assessments conducted at kindergarten entry to inform policymakers about the school readiness of children across the State on a broad range of domains, used to guide program initiatives (this corresponds to 3.2.6b).

In the description for each Yes response, please include a) who administers, and b) how often assessments are conducted, and c) what assessment tools are used.

a) Are programs required to conduct ongoing assessments of children's progress of children using valid, reliable and age-appropriate tools aligned with the early learning guidelines or other child standards?
☑ Yes.
Describe:

Providers enrolled in the state QRIS at Level 4 assess children's progress at least annually as part of national accreditation requirements. A variety of tools may used for these assessments.

Providers may use the free ISTAR-KR assessment> This is a valid Indiana assessment that is aligned with the ELG.

b-1) If yes, are programs encouraged to use information from ongoing assessments to improve practice and individual children's needs?

☑ Yes.
Describe:

Training is available to providers to assist them in using their assessments of individual children to individualize their curriculum plans.

☐ No

☐ Other.
Describe:

b-2) If yes, is information on child's progress reported to parents?
☑ Yes.
Describe:

Providers enrolled in Paths to QUALITY are required to communicate information to parents both daily and at annual family conferences.

☐ No

☐ Other.
Describe:

☐ No

☐ Other.
Describe:

b) Does the State/Territory use tools that are valid, reliable and age-appropriate to track the readiness of children as they enter kindergarten?
☑ Yes.
Describe:

The state has developed an assessment tool (I-Star KR) to track children's readiness to enter school. This assessment tool has been validated and aligns with the ELG. Providers may use this tool for free and training and support is available.

c-1) If yes, do the tools cover the developmental domains identified in 3.2.2?
☑ Yes.
Describe:

The state developed the assessment tool(I-Star-KR) is based on the state ELG .

☐ No

☐ Other.
Describe:

c-2) If yes, are the tools used on all children or samples of children?
☐ All children.
Describe:

☐ Samples of children.

Describe:

☑ Other.

Describe:

Assessment is only required for children enrolled in the state special education preschool programs but the tool is available to be used for all children.

c-3) If yes, is the information from the school readiness measures used to target program quality improvement activities?
☐ Yes.
Describe:

☑ No

☐ Other.
Describe:

☐ No

☐ Other.
Describe:

c) Is school readiness information linked to the statewide longitudinal data system (SLDS, program of the Department of Education)?
☑ Yes.
Describe:

 Children in programs that utilize the ISTAR-KR are assigned a student test number. This number is the same number that the children will have throughout their school career and the information is contained

☐ No

☐ Not applicable. State does not have an SLDS.

3.2.7 Data & Performance Measures on Voluntary Early Learning Guidelines (Click for additional instructions)

a) **Data on voluntary early learning guidelines.** Indicate if the Lead Agency or another agency has access to data on:

☑ Number/percentage of child care providers trained on ELG's for preschool aged children.
Describe (optional):

Providers particiapting in Level 2 or higher of Paths to QUALITY (PTQ).

☑ Number/percentage of child care providers trained on ELG's for infants and toddlers.
Describe (optional):

Providers participating in Level 2 or higher of PTQ.

☑ Number of programs using ELG's in planning for their work.
Describe (optional):

Providers in level 3 and level 4 of Paths to QUALITY

☐ Number of parents trained on or served in family support programs that use ELG's.
Describe (optional):

☐ Other.
Describe:

☐ None.
b) **Performance measurement.** What, if any, are the Lead Agency's performance measures related to dissemination and implementation of the early learning guidelines?

• *Number of programs receiving training on the ELG*
• *Number of programs with curriculum based on ELG*

c) **Evaluation.** What are the State/Territory's plans, if any, for evaluation related to early learning guidelines? Evaluation can include efforts related to monitoring implementation

of an initiative validation of standards or program assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

- *Indiana DOE is planning to review and update the ELGs to better align with the state child assessment tool, I-Star, over the next two years*

3.2.8 Goals for the next Biennium -

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). What are the Lead Agency's goals for using voluntary early learning guidelines in the coming biennium? What progress does the Lead Agency expect to make related to early learning guidelines?

Goals for the next Biennium include:

- *Continued alignment between Indiana's PD system and the Early Learning Guidelines; and*
- *Increase training opportunities for providers and families, including online training on the ELG.*

3.3 Creating Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3) (Click for additional instructions)

a) Describe which entities are involved in planning and administering the program quality improvement activities in 3.3, including State/Territory entities and local or community level entities.

The Lead Agency, the Head Start Collaboration Office, Higher Education Forum, The Indiana Department of Education, Indiana Association for the Education of Young Children, Indiana Association of Child Care Resource and Referral Agencies, 11 local Child Care Resource and Referral Agencies, The Consultants Consortium, Infant and Toddler Specialist Network, and School Age organizations, child care providers representing a vareity of program types.

3.3.1 Element 1 - Program Standards

Definition - For purposes of this section, program standards refers to the expectations for quality, or quality indicators, which identify different levels of and pathways to improved quality. Minimum licensing standards and health and safety requirements provided in section 3.1 are also program standards but in this section, we focus on those standards that build upon and go beyond those minimum requirements.

a) Does your State/Territory's have quality improvement standards that include indicators covering the following areas beyond what is required for licensing? Check any indicators, if any, that your State/Territory has chosen to establish.

☐ Ratios and group size
☑ Health, nutrition and safety
☑ Learning environment and curriculum
☑ Staff/Provider qualifications and professional development
☑ Teacher/providers-child relationships
☑ Teacher/provider instructional practices
☑ Family partnerships and family strengthening
☑ Community relationships
☑ Administration and management
☑ Developmental screenings
☑ Child assessment for the purposes of individualizing instruction and/or targeting program improvement
☑ Cultural competence
☐ Other.
Describe:

☐ None. If checked, **skip to 3.3.2.**

b) Does your State/Territory have quality improvement standards with provisions about the care of any of these groups of children? Check any provisions your State/Territory has chosen to establish.

☑ Children with special needs as defined by your State/Territory
☑ Infants and toddlers
☑ School-age children
☐ Children who are dual language learners
☐ None

c) How do your State/Territory's quality standards link to State/Territory licensing requirements? Check any links between your State/Territory's quality standards and licensing requirements.

☐ Licensing is a pre-requisite for participation
☑ Licensing is the first tier of the quality levels
☐ State/Territory license is a "rated" license.
☐ Other.
Describe:

☐ Not linked.

d) Do your State/Territory's quality improvement standards align with or have reciprocity with any of the following standards? Check any alignment, if any, between your State/Territory's quality standards and other standards.

☐ Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system)

☐ Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)

☑ Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)

☐ Other.
Describe:

☐ None.

3.3.2 Element 2 - Supports to Programs to Improve Quality

Definition - For purposes of this section, supports to programs to improve quality refers to such activities as technical assistance and consultation services for programs to assist in meeting child care quality improvement standards.

a) Check which types of and for what purposes the State/Territory uses supports to child care programs, if any, in the following chart. If none, **skip to 3.3.3.**

☐ None. **skip to 3.3.3.**

Types and Purposes of Support	Information or Written Materials	Training	On-Site Consultation
☑ Attaining and maintaining licensing compliance	☑	☑	☑
☑ Attaining and maintaining quality improvement standards beyond licensing	☑	☑	☑

☑ Attaining and maintaining accreditation	☑	☑	☑
☑ Providing targeted technical assistance in specialized content areas:			
Health and safety	☑	☑	☑
Infant/toddler care	☑	☑	☑
School-age care	☑	☑	☑
Inclusion	☑	☑	☑
Teaching dual language learners	☑	☑	☑
Mental health	☑	☑	☑
Business management practices	☑	☑	☑
Other. Describe: QRIS level advancement	☑	☑	☑

b) Methods used to customize quality improvement supports to the needs of individual programs include:

☑ Program improvement plans
☑ Technical assistance on the use of program assessment tools
☐ Other.
Describe:

c) Is technical assistance linked to entering the QRIS or targeted to help programs forward on QRIS?

☑ Yes.
Describe:

All Paths to Quality providers have access to free onsite technical assistance through a highly qualified mentor. Mentors work with providers to develop A quality improvement plan at each level that addresses the standards for that level and the improvements that must be implemented to reach the next level of quality.
TA is also available to unlicensed registered ministries who are not yet enrolled in Paths to QUALITY but are committed to achieving voluntary certification that would enable them to participate in the QRIS.

☐ No
☑ Other.
Describe:

In addition to the Paths to QUALITY mentors targeted supports such as Health Consultants, Infant Toddler Specialists and Inclusion Specialist are available to all providers.

3.3.3 Element 3 - Financial Incentives and Supports

Definition - For purposes of this section, financial incentives refers to the types of monetary supports offered to programs in meeting and sustaining licensing and QRIS or other child care quality improvement standards for programs.

a) Identify which types of financial incentives are offered and to which providers in the following chart. Check which incentives and supports, if any, the State/Territory chooses to offer. If none, **skip to 3.3.4.**

☐ None. **skip to 3.3.4.**

Types of Financial Incentives and Supports for Programs	Child Care Centers	Child Care Homes	License-Exempt Providers
☐ Grants to programs to meet or maintain licensing	☐	☐	☐
☐ Grants to programs to meet QRIS or similar quality level	☐	☐	☐
☑ One-time awards or bonuses on completion of quality standard attainment	☑	☑	☑
☑ Tiered reimbursement tied to quality for children receiving subsidy	☑	☑	☑

☑ On-going, periodic grants or stipends tied to maintaining quality	☑	☑	☑
☐ Tax credits tied to meeting program quality standards	☐	☐	☐
☐ Other. Describe:	☐	☐	☐

3.3.4 - Element 4 - Quality Assurance and Monitoring

Definition - For purposes of this section, quality assurance and monitoring refers to the ways that the State/Territory measures program quality for the purposes of its QRIS or other quality improvement system and the methods for measuring that the child care quality improvement standards for programs are met initially and maintained over time.

a) What tools, if any, does the State/Territory use to measure and monitor the quality of programs? Check all that apply and briefly describe using the chart below, including which programs are required to participate and the frequency of assessments. **If none, skip to 3.3.5.**
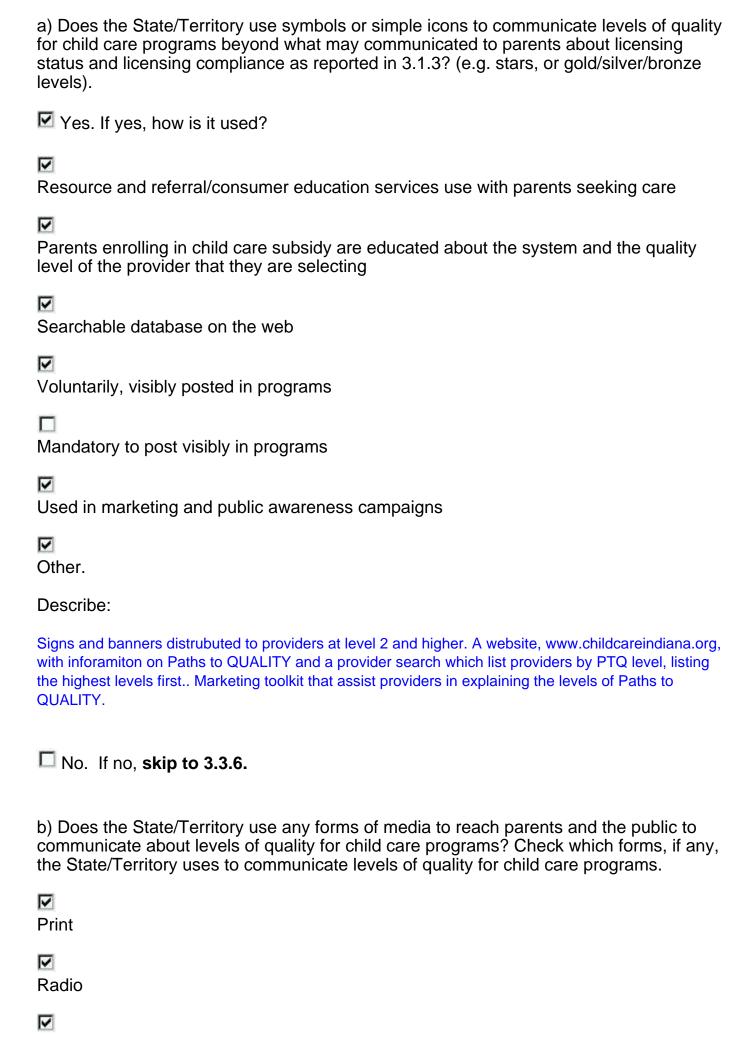
☐ None. **skip to 3.3.5.**

Types of Program Quality Assessment Tools	Child Care Centers	Child Care Homes	License-Exempt Providers
☑ Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS) Describe, including frequency of assessments. As needed as a tool for technical assistance.	☑ Infant/Toddler ☑ Preschool ☐ School-Age	☑	☑
☑ Classroom Assessment Scoring System (CLASS) Describe, including frequency of assessments. CLASS has been used with specific PTQ projects such as the Registered Ministry Quality Improvement Project	☐	N/A	☑

☑ Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homes Describe, including frequency of assessments. As needed as a tool for technical assistance	☑	☑	☑
☑ Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21st Century Learning Center programs Describe, including frequency of assessments. Annual assessment or prior to level increase for providers participating in QRIS.	☑	☑	☑
☐ Other. Describe:	☐	☐	☑

b) What steps, if any, has the State/Territory taken to align quality assurance and monitoring across funding streams and sectors in order to minimize duplication?

☑ Have a mechanism to track different quality assessments/monitoring activities to avoid duplication

☑ Include QRIS or other quality reviews as part of licensing enforcement

☑ Have compliance monitoring in one sector (e.g., Head Start/Early Head Start, State/Territory pre-k) serve as validation for compliance with quality improvement system (e.g., QRIS) without further review

☐ Have monitoring for meeting accreditation standards serve as validation for compliance with quality improvement system (e.g., QRIS) without further review

☑ Other.
Describe:

Monitoring for accreditation serves as validation for tiered reimbursement, as well as part of level 4 in QRIS.

☐ None.

3.3.5 - Element 5 - Outreach and Consumer Education

Definition - For purposes of this section, outreach and consumer education refers to the strategies used to promote the child care quality improvement standards to parents, programs and the general public.

a) Does the State/Territory use symbols or simple icons to communicate levels of quality for child care programs beyond what may communicated to parents about licensing status and licensing compliance as reported in 3.1.3? (e.g. stars, or gold/silver/bronze levels).

☑ Yes. If yes, how is it used?

☑

Resource and referral/consumer education services use with parents seeking care

☑

Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting

☑

Searchable database on the web

☑

Voluntarily, visibly posted in programs

☐

Mandatory to post visibly in programs

☑

Used in marketing and public awareness campaigns

☑

Other.

Describe:

Signs and banners distrubuted to providers at level 2 and higher. A website, www.childcareindiana.org, with inforamiton on Paths to QUALITY and a provider search which list providers by PTQ level, listing the highest levels first.. Marketing toolkit that assist providers in explaining the levels of Paths to QUALITY.

☐ No. If no, **skip to 3.3.6.**

b) Does the State/Territory use any forms of media to reach parents and the public to communicate about levels of quality for child care programs? Check which forms, if any, the State/Territory uses to communicate levels of quality for child care programs.

☑

Print

☑

Radio

☑

Television

☑
Web

☑
Telephone

☑
Social Marketing

☑
Other.

Describe:

Bus signs, billboards, web commercials, press releases. Providers are given a toolkit to use in marketing their program to parents with QRIS info.

☐
None.

c) Describe any targeted outreach for culturally and linguistically diverse families.

An Hispanic outreach project assists parents as well as child care providers with information, referrals and training, PSAs and print materials are available in Spanish.   Presentations on child care and Paths to QUALITY have also been offered in other languages including Burmese at the local level as needed.

3.3.6. Quality Rating and Improvement System (QRIS)

a) **Based on the five key elements of a QRIS described above in 3.3.1 through 3.3.5,** does your State/Territory have a quality rating and improvement system (QRIS) or similar quality improvement system in place?

☑ Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating State/Territory-wide.

☑
Participation is voluntary for:

 regulated providers

☐
Participation is mandatory for:

☐ Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements <u>operating as a pilot or in a few localities</u> but not State/Territory-wide.

☐ No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements.

☐ State/Territory is in the development phase
☐ State/Territory has no plans for development

☐
Other.

Describe:

b) If yes to 3.3.6a, **CHECK** the types of providers eligible to participate in the QRIS:

☑
Child care centers

☐
Group child care homes

☑
Family child care homes

☐
In-home child care

☑
License exempt providers

☑
Early Head Start programs

☑
Head Start programs

☐
Pre-kindergarten programs

☑
School-age programs

☐
Other.

Describe:

3.3.7. If the State/Territory has or will have any quality improvement strategies for targeted groups of providers (e.g., relative caregivers or caregivers who are legally exempt from licensing) that are not described in your responses to any question in section 3.3 above,

please describe:

The Lead Agency offers outreach and assistance to legally licensed exempt providers in becoming licensed and joining Paths to QUALITY.

3.3.8 Data & Performance Measures on Program Quality (Click for additional instructions)

a) Data on program quality. Indicate if the Lead Agency or another agency has access to data on:

☑
Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory.

Describe:

Data is availalble on registered programs who are voluntarily certified and programs that are nationally accredited.
Data is availalbe on providers enrolled in Paths to QUALITY.

☑
Number of programs that move program quality levels annually (up or down).

Describe:

The number of Paths to QUALITY programs that increase and/or decrease quality levels is tracked.

☑

Program scores on program assessment instruments.

List instruments:

Paths to QUALITY^{TM} Readiness Checklist

Describe:

The Readiness checklist is used to assess program compliance with the Paths to QUALITY Standards for each level.

☐
Classroom scores on program assessment instruments.

List instruments:

Describe:

☑
Qualifications for teachers or caregivers within each program.

Describe:

Data is available for teachers and caregivers including education levels as required by licensing such as CDA requirements. Additional data is tracked on Paths to QUALITY providers, such as completed trainings.

☑
Number/Percentage of children receiving CCDF assistance in licensed care.

Describe:

The data is available for all children receiving CCDF assistance including percentage in licensed care, percentage in Paths to QUALITY, by level.

☑
Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory

☑
Number/Percentage of programs receiving financial assistance to meet higher program standards.

Describe:

Data is availalbe on all programs enrolled in Paths to QUALITY that have recieved financial assistance in the form of awards and incentives. Data is availalbe on the number of programs that have also received financial support for scholarships and through the accreditation project.

☐
Other.

Describe:

☐
None.

b) **Performance measurement.** What, if any, are the Lead Agency's performance measures on program quality?

- *Enrollment in Paths to QUALITY by provider type*
- *Percentage of increase in Paths to QUALITY levels*

c) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to program quality? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

The Paths to QUALITY database allows ongoing monitoring and reports to assess progress toward goals. Purdue University is conducting an ongoing evaluation of Paths to QUALITY implementation, performance measures and outcomes.

3.3.9 Goals for the next Biennium -

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies are not required to establish a goal for each sub -section in 3.3. What are the State/Territory's goals for the program quality improvement system in the coming biennium? What progress does the State/Territory expect to make across the five key elements for quality improvement systems?

Goals for the next Biennium include:

- *Review of the evaluation data and the QRIS standards;*
- *Clarify and enhance the assessment tool for school age children; and*
- *Develop an individual provider database within CCIS system for tracking staff qualifications and licensing requirements.*

3.4 Pathways to Excellence for the Workforce - Professional Development Systems and Workforce Initiatives (Component #4)

Pathways to excellence for the workforce builds on the significant investments States and Territories have made in the area of professional development systems to ensure a well-qualified workforce with opportunities for growth from entry level through master teacher, with an increasing emphasis on the many additional roles in the child care system (e.g. adult educators such as consultants, technical assistance providers, trainers, and higher education faculty). In this section, States and Territories provide a self-assessment on current professional development and workforce activities and describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to five key elements for workforce systems:

1) Core Knowledge and Competencies
2) Career Pathways (or Career Lattice)
3) Professional Development Capacity
4) Access to Professional Development
5) Compensation, Benefits and Workforce Conditions

a) Describe which entities are involved in planning and administering the activities in Section 3.4, including State/Territory entities and local or community level entities.

The Lead Agency, Indiana Department of Education, Higher Education Forum, Head Start and Early Head Start, Infant Toddler Specialist Network, School Age Child Care Partners including Youthpro and the Afterschool Network, Provider Advisory Groups, Indiana Association for the Education of Young Children, The Indiana Association of Child Care Resource and Referral, First Steps, Infant Toddler Mental Health Specialist, Sunny Start (State ECCS grantee), Indiana Board of Health.

3.4.1 Workforce Element 1 - Core Knowledge and Competencies

Definition - For purposes of this section, core knowledge and competencies (CKCs) refers to the expectations for what the workforce should know (content) and be able to do (skills) in their role working with and/or on behalf of children and their families. These CKCs provide a foundation for professional development design (including instructional practices) and other quality improvement efforts.

a) Has the State/Territory developed core knowledge and competencies (CKCs) for practitioners working with and/or on behalf of children?

☑ Yes
☐ No, the State/Territory has not developed core knowledge and competencies. **Skip to question 3.4.2.**

☐ Other.
Describe:

b) Check which of the following teaching and learning topics, if any, are covered in the CKCs.

☑ Child growth, development and learning
☑ Health, nutrition, and safety
☑ Learning environment and curriculum
☑ Interactions with children
☑ Family and community relationships
☑ Professionalism and leadership
☑ Observation and assessment
☑ Program planning and management
☑ Diversity
☐ Other.
Describe:

☐ None.

c) Are the CKCs incorporated into other parts of the child care system? Check which ways, if any, the State/Territory incorporates its CKCs into other parts of the child care system.

☑ To define the content of training required to meet licensing requirements
☑ To define the content of training required for program quality improvement standards (as reported in section 3.3)
☑ To define the content of training required for the career lattice or credential
☑ To correspond to the early learning guidelines
☑ To define curriculum and degree requirements at institutions of higher education
☐ Other.
Describe:

☐ None.

d) Are the CKCs aligned with other State/Territory or national standards? Check which ways, if any, the State/Territory aligns its CKCs with other standards.

☑ Cross-walked with the Child Development Associate (CDA) competencies
☑ Cross-walked with national teacher preparation standards (e.g., NAEYC standards for early childhood professional preparation, National Board of Professional Teaching Standards, Head Start SOLAR staff skills indicators)
☐ Cross-walked with apprenticeship competencies
☐ Other.
Describe:

☐ None.

e) Check for which roles, if any, the State/Territory developed supplemental or specialized competencies.

☑ Staff working directly with children in centers, including aides, assistants, teachers, master teachers.
Describe:

Infant/toddler Certificate
Indiana Youth Development Credential

☐ Providers working directly with children in family child care homes, including aides and assistants.
Describe:

☑ Administrators in centers (including educational coordinators, directors).
Describe:

 A Child Care Administrator's certification has been developed.

☑ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.).
Describe:

A technical assistance certification has been developed and is required for Infant/Toddler Specialist, Inclusion Specialist and all mentors.

☑ Education and training staff (such as trainers, CCR&R staff, faculty).
Describe:

CCRR staff must meet NACCRR Quality Assurance Standards and competencies

☐ Other.
Describe:

☐ None.

f) Check if the State/Territory has developed any supplemental or specialized competencies for practitioners/providers working with the following ages.

☑ Birth-to-three
☐ Three-to-five
☑ Five and older
☐ Other.
Describe:

☐ None.

3.4.2 Workforce Element 2 - Career Pathways

Definition - For purposes of this section, career pathways (or career lattice) defines the options and sequence of qualifications and ongoing professional development to work with children. Career pathways assist professionals in understanding their career options and identify steps for advancement for the workforce recognizing and rewarding higher levels of preparation and mastery of practice to promote higher quality services for children.

a) Does the State/Territory have a career pathway which defines the sequence of qualifications related to professional development (education, training and technical assistance) and experience required to work with children?

☑ Yes.

Describe:

There is a career pathway that includes seven vertical levels and recognizes achievements within each level. The career pathway enables both early care and education practitioners and secondary/post secondary students to see that the profession has arenas of advancement and to see themselves

progressing within it. Work is continuing on development and agreement toward a collaborative statewide PD system through the Indiana Professional Development Network. The career pathway will be included in the emerging Professional Development System.

☐ No, the State/Territory has not developed a career pathway. **Skip to question 3.4.3.**

b) Check for which roles, if any, the career pathway (or lattice) include qualifications, specializations or credentials.

☑ Staff working directly with children in centers, including aides, assistants, teachers, master teachers.
Describe:

There are seven vertical levels that recognize achievement within each level beginning with training toward a CDA at Level I, achieving a CDA at Level II, achieving an Associate degree at Level IV, achieving a Bachelor degree at Level V, a Master degree at Level VI, and a Doctoral degree at Level VII. Additionally, an Infant Toddler Credential, a School Age/Youth Development Credential, and a Director Credential can be recognized.

☑ Providers working directly with children in family child care homes, including aides and assistants.
Describe:

There are seven vertical levels that recognize achievement within each level beginning with training toward a CDA at Level I, achieving a CDA at Level II, achieving an Associate degree at Level IV, achieving a Bachelor degree at Level V, a Master degree at Level VI, and a Doctoral degree at Level VII. Additionally, an Infant Toddler Credential, a School Age/Youth Development Credential, and a Director Credential can be recognized.

☑ Administrators in centers (including educational coordinators, directors).
Describe:

There are seven vertical levels that recognize achievement within each level beginning with training toward a CDA at Level I, achieving a CDA at Level II, achieving an Associate degree at Level IV, achieving a Bachelor degree at Level V, a Master degree at Level VI, and a Doctoral degree at Level VII. Additionally, an Infant Toddler Credential, a School Age/Youth Development Credential, and a Director Credential can be recognized.

☑ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.).
Describe:

There are seven vertical levels that recognize achievement within each level beginning with training toward a CDA at Level I, achieving a CDA at Level II, achieving an Associate degree at Level IV,

achieving a Bachelor degree at Level V, a Master degree at Level VI, and a Doctoral degree at Level VII. Additionally, an Infant Toddler Credential, a School Age/Youth Development Credential, and a Director Credential can be recognized.   Thethe   The new Quality Enhancement Technical Assistance Certificate wil be available by 10/1/11 for mentors, advisors and specialists.

☑ Education and training staff (such as trainers, CCR&R staff, faculty).
Describe:

 There are seven vertical levels that recognize achievement within each level beginning with training toward a CDA at Level I, achieving a CDA at Level II, achieving an Associate degree at Level IV, achieving a Bachelor degree at Level V, a Master degree at Level VI, and a Doctoral degree at Level VII. Additionally, an Infant Toddler Credential, a School Age/Youth Development Credential, and a Director Credential can be recognized.   Thethe   The new Quality Enhancement Technical Assistance Certificate wil be available by 10/1/11 for mentors, advisors and specialists.

☐ Other.
Describe:

☐ None.

c) Does the career pathway (or lattice) include specializations or credentials, if any, for working with any of the following children?

☐ Infants and toddlers
☐ Preschoolers
☐ School-age children
☐ Dual language learners
☐ Children with disabilities, children with developmental delays, and children with other special needs
☐ Other.
Describe:

☐ None.

d) In what ways, if any, is the career pathway (or lattice) used?

☐ Voluntary guide and planning resource
☐ Required placement for all practitioners and providers working in programs that are licensed or regulated in the State/Territory to serve children birth to 13
☐ Required placement for all practitioners working in programs that receive public funds to serve children birth to 13
☐ Required placement for adult educators (i.e., those that provide training, education

and/or technical assistance)

☐ Required placement for participation in scholarship and/or other incentive and support programs

☐ Required placement for participation in the QRIS or other quality improvement system

☐ Other.
Describe:

☐ None.

e) Are individuals' qualifications, professional development, and work experience verified prior to placement on the career pathway (or lattice?)?

☐ Yes.
If yes, describe:

☐ No.

3.4.3 Workforce Element 3 - Professional Development Capacity

Definition - For purposes of this section, professional development incorporates higher education, training and technical assistance. Higher education capacity refers to capability of the higher education system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Training and technical assistance capacity refers to capability of the training and technical assistance system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children.

a) Has the State/Territory assessed the availability of degree programs in early-childhood education, school-age care or youth development, and related fields in the State/Territory (e.g., both physical location and distance-based, accessibility to practitioners, etc.)?

☑ Yes.
If yes, describe:

Environmental scans are used to determine the availability of degree programs throughout the state.

☐ No.

b) Has the State/Territory assessed the availability of early-childhood and school-age and related training and technical assistance programs in the State/Territory (e.g., both physical location and distance-based, degree level, etc.)?

☑ Yes.
If yes, describe:

Environmental scans are used to determine availability and gaps in training.

☐ No.

c) What quality assurance mechanisms, if any, are in place for the degree programs and courses offered by the State/Territory institutions?

☑ Standards set by the institution
☑ Standards set by the State/Territory higher education board
☑ Standards set by program accreditors
☐ Other.
Describe:

☐ None.

d) What quality assurance mechanisms, if any, are in place for the training and technical assistance programs offered by the State/Territory?

☐ Training approval process.
Describe:

☐ Trainer approval process.
Describe:

☑ Training and/or technical assistance evaluations.
Describe:

Training provided thru CCDF requires trainers to collect evaluations of the training provided from the participants.

☐ Other.
Describe:

☐ None.

e) Does the State/Territory have articulation agreements in place across and within institutions of higher education?

☑ Yes.
If yes, describe:

Indiana has 15 articulation agreements from the associate to the bachelor degree articulating 55 credit hours or more. A common curriculum is used across all community colleges.

☐ No.

f) Does the State/Territory have articulation agreements that translate training and/or technical assistance into higher education credit?

☑ Yes.
If yes, describe:

A CDA credential is the equivalent of 9 – 12 college credits. High School Voc Ed students have 4 courses that align with the community college curriculum for 12 credit hours.

☐ No.

3.4.4 Workforce Element 4 - Access to Professional Development

  Definition - For purposes of this section, access to professional development (training, education and technical assistance) refers to the degree to which practitioners are made aware of, and receive supports and assistance to utilize, professional development opportunities.

a) Does the State/Territory have professional development opportunities accessible for professionals in various or all sectors of the early childhood and school-age field?

☑ Yes. If yes, for which sectors?
☑ Child care
☑ Head Start/Early Head Start
☑ Pre-Kindergarten

☑ Public schools
☑ Early intervention/special education
☐ Other.
Describe:

☐ No.

b) Does the State/Territory have a State/Territory-wide, coordinated and easily accessible clearinghouse of information about professional development opportunities available to all members of the early childhood and school-age workforce? Lead Agencies are not required to have a professional development system, but States/Territories may develop such clearinghouses to promote access to professional development opportunities.

☐ Yes.
If yes, describe:

☑ No.

c) What supports, if any, does the State/Territory provide to promote access to training and education activities?

☑ Scholarships.
Describe:

 The T.E.A.C.H. Early Childhood ^{TM} Indiana project provides scholarship supports for CDA, the School Age/Youth Development Credential , and EC Associate, and Batchelor degrees.

☑ Free training and education.
Describe:

The network of local CCR&Rs and the Indiana Association of Child Care Resource and Referral provide free local training and education for the child care workforce. The state QRIS provides for on site mentoring and technical assistance at no cost. In addition, Health Consultants from the Lead Agency provide free training and education on health and safety issues.

☑ Reimbursement for training and education expenses.
Describe:

The T.E.A.C.H. Early Childhood ^{TM} Indiana project provides scholarship supports for CDA, Associate, and Batchelor degrees. Part of the support includes reimbursement for books and travel to classes for scholarship recipients.

☐ Grants.
Describe:

☐ Loans.
Describe:

☐ Loan forgiveness programs.
Describe:

☐ Substitute pools.
Describe:

☐ Release time.
Describe:

☐ Other.
Describe:

☐ None.

d) Does the State/Territory have career advisors for early childhood and school-age practitioners?

☑ Yes.
If yes, describe:

The T.E.A.C.H. Early Childhood ^{TM} Indiana project provides scholarship supports for CDA, the School Age/Youth Development Credential, and EC Associate, and Batchelor degrees that includes career advisors.

☐ No.

e) Does the State/Territory have mentors, coaches, consultants, and/or other specialists available to provide technical assistance to the workforce?

☑ Yes.
If yes, describe:

The following are available to provider TA to the workforce:
* *QRIS mentors and quality advisors,*
* *accreditation advisors,*
* *Infant Toddler specialists,*
* *Inclusion specialists,*
* *CDA advisors*
* *Health Consultants*
* *T.E.A.C.H. Early Childhood Indiana^{TM} advisors*

☐ No.

3.4.5 Workforce Element 5 - Compensation, Benefits and Workforce ConditionsDefinition - For purposes of this section, rewards for education and training refers to any financial supports provided to practitioners for participating in and completing education or training or for increasing compensation.

a) Does the State/Territory have a salary or wage scale for various professional roles?

☐ Yes.
If yes, describe:

☑ No.

b) Does the State/Territory provide financial rewards for participation in professional development, such as one-time salary bonuses for completing a training or education program?

☑ Yes.

If yes, describe:

T.E.A.C.H. scholarship recipients receive a bonus or salary increase upon completing their program.

☐ No.

c) Does the State/Territory provide sustained financial support on a periodic, predictable basis, such as annual wage supplements, based on the highest level of training and education achieved?

☐ Yes.
If yes, describe:

☑ No.

d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?

☐ Yes.
If yes, describe:

☑ No.

3.4.6 Data & Performance Measures on the Child Care Workforce - What data elements, if any, does the State/Territory currently have access to related to the child care workforce? What, if any, does the State/Territory use for performance measures on professional development and workforce initiatives? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) Data on the child care workforce. Indicate if the Lead Agency or another agency has access to data on:

☑ Data on the size of the child care workforce.

Describe (optional):

Based on 2011 Workforce Survey conducted by Indiana AEYC.

☑ Data on the demographic characteristics of practitioners or providers working directly with children.
Describe (optional):

Based on 2011 Workforce Survey conducted by Indiana AEYC.

☑ Records of individual teachers or caregivers and their qualifications.
Describe (optional):

those enrolled in T.E.A.C.H.

☑ Retention rates.
Describe (optional):

for programs participating in T.E.A.C.H.

☑ Records of individual professional development specialists and their qualifications.
Describe (optional):

for individuals under contract for PD work with lead agency

☑ Qualifications of teachers or caregivers linked to the programs in which they teach.
Describe (optional):

those enrolled in T.E.A.C.H. and teachers/caregivers within Paths to QUALITY

☑ Number of scholarships awarded .
Describe (optional):

☑ Number of individuals receiving bonuses or other financial rewards or incentives.
Describe (optional):

those enrolled in T.E.A.C.H. or for programs in the QRIS.

☑ Number of credentials and degrees conferred annually.
Describe (optional):

☑ Data on T/TA completion or attrition rates.
Describe (optional):

Hours of mentoring for Paths to QUALITY providers is tracked

☑ Data on degree completion or attrition rates.
Describe (optional):

those enrolled in T.E.A.C.H.

☐ Other.
Describe:

☐ None.

b) Does the State/Territory have a workforce data system, such as a workforce registry, which tracks workforce demographics, compensation, and qualifications and ongoing professional development for practitioners working with children birth to age 13?

Definition - For purposes of this section, a workforce data system refers to a system, such as a workforce registry, that tracks the size and characteristics of the child care workforce, including longitudinal data to monitor changes over time. The data system also can produce records to validate and verify qualifications or ongoing professional development for licensing, accreditation, QRIS, wage incentives, and credentials.

☐ Yes.

b-1) If yes, which roles are included in the workforce data system? For each role checked, indicate in your description whether participation is voluntary or mandatory.

☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers.
Describe:

☐ Providers working directly with children in family child care homes, including aides and assistants.
Describe:

☐ Administrators in centers (including educational coordinators, directors).
Describe:

☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.).
Describe:

☐ Education and training staff (such as trainers, CCR&R staff, faculty).
Describe:

☐ Other.
Describe:

☐ None.

b-2) Does the workforce data system apply to:

☐ all practitioners working in programs that are licensed or regulated by the State/Territory to serve children birth to 13?
☐ all practitioners working in programs that receive public funds to serve children birth to age 13?
☑ No.

c) **Performance measurement.** What, if any, performance measures does the State/Territory use related to its workforce and professional development systems?

The Lead Agency conducts periodic environmental scans of the educational and training opportunities available throughout the state. Lead Agency tracks the number of Higher Education articulation agreements. The Lead Agency tracks detailed information on T.E.A.C.H. recipients and the educational attainment of certain providers.

d) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to its workforce and professional development systems? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

The Lead Agency is currently reviewing the Professional Development System and the 2011 Workforce study data to identify areas of strengths and opportunities and will conduct strategic planning based on these evaluations.

3.4.7 Goals for the next Biennium -

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies are not required to establish a goal for each sub-section in 3.4. What are the State/Territory's goals for the building the professional development system and improving conditions for the workforce in the coming biennium? What progress does the State/Territory expect to make across the five key elements for the workforce and professional development system described above?

Goals for the next Biennium include:

- *Adoption of state wide cross sector core knowledge and competencies;*
- *Continued develop of the Indiana career pathways;*
- *Increase the professional development capacity across the state; and*
- *Continue to increase the number of articulation agreements in place.*